

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
CHIEF INFORMATION OFFICE



INTEGRATED SYSTEM CODES MANUAL

Published by
Chief Information Office
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IMPROVING COMMUNITY CARE THROUGH TECHNOLOGY

Originally Published in February, 2004
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ADMISSION NECESSITY CODE

Identifies the type or reason for the client's admission into an acute care hospital.

<u>Code</u>	<u>Type</u>
1	Emergency
2	Planned (Prior Authorization)
9	Unknown Not Reported

NOTE:

The above codes are only applicable to Inpatient Episodes.

AGENCY OF PRIMARY RESPONSIBILITY (APR)

<u>Code</u>	<u>Agency of Primary Responsibility</u>
1	Department of Children's Services: Dependent and/or under Supervision of DCS (including Family Preservation)
2	Department of Probation: Ward
3	Department of Children's Services: Dependent and/or under DCS Supervision; and School District: SEP eligible
4	Department of Probation: Ward; and School District: SEP eligible
5	School District: SEP eligible
6	School District: SED on IEP (not SEP)
7	None

AGE CATERGORY

Age Categories for Community Outreach Services (COS) BEFORE July 1, 2008

<u>Code</u>	<u>Age Category</u>
01	0 - 12
02	13 - 17
03	0 - 17
04	18 - 24
05	25 - 44
06	45 - 59
07	18 - 59
08	60+
09	Unknown

Age Categories for Community Outreach Services (COS) EFFECTIVE July 1, 2008

<u>Code</u>	<u>Age Category</u>
10	0 - 15
11	16 - 25
12	26 - 59
08	60+
13	Multiple
09	Unknown

AUTHORIZATION FOR TREATMENT OF MINOR

Authorization for Treatment of Minor is required to open an episode, i.e., if it is not entered, the computer will not accept the other episode information. All clients under 18 at admission must have a code indicating the source of authorization for their treatment. For clients 18 or older at admission, the field does not appear on the Episode screen. The field represents authority for treatment at time of admission only. Updating this field as status changes within an episode should not be done.

<u>Code</u>	<u>Description</u>	<u>Definition</u>
01	Parent	A father or mother who has legal custody authorizes treatment.
02	Juvenile Court W & I 300A	Authorization by Juvenile Court due to determination minor did not have effective parental care or control.
03	Juvenile Court W & I 300B	Authorization by Juvenile Court due to determination minor is destitute or not provided with necessities of life or a suitable home.
04	Juvenile Court W & I 300C	Authorization by Juvenile Court due to determination minor is dangerous to the public because of a mental or physical deficiency, disorder or abnormality.
05	Juvenile Court W & I 300D	Authorization by Juvenile Court due to determination minor has an unfit home due to neglect, cruelty, depravity or physical abuse by a parent or guardian.
06	Juvenile Court W & I 300E	Authorization by Juvenile Court due to determination minor has been freed or relinquished for adoption for 12 months and no adoption petition has been granted.
07	Juvenile Court W & I 300	For use when multiple W & I 300s or a W & I 300 (letter unknown) is the authorization.
08	Juvenile Court W & I 601	Authorization by Juvenile Court due to determination minor is persistently disobedient or truant.
09	Juvenile Court W & I 602	Authorization by Juvenile Court due to determination minor who has committed an adult-type crime will be adjudicated as a minor due to his/her age.
10	Juvenile Court W & I 7023	Authorization by Juvenile Court due to determination minor is not guilty of an offense by reason of insanity.

AUTHORIZATION FOR TREATMENT OF MINORS (con't.)

<u>Code</u>	<u>Description</u>	<u>Definition</u>
11	Legal Guardian	Authorization by person other than a parent who has legal custody of minor.
12	Adoption Agency	Authorization by adoption agency which has become the guardian.
13	LPS Conservator	Authorization by a person responsible for the affairs of minor under jurisdiction of Lanterman-Petris-Short Act.
14	Emancipated Minor	Authorization by self, i.e., minor who is legally released from parental control or supervision.
15	Other	Other authorization not listed above.
99	Unknown	A code for temporary use; the reason for authorization must be determined and entered as soon as possible.

AXIS III- PHYSICAL DIAGNOSES

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
00000	NO ADDITIONAL MENTAL OR PHYSICAL DIAGNOSIS
001	CHOLERA
002	TYPHOID AND PARATYPHOID FEVERS
003	OTHER SALMONELLA INFECTIONS
004	SHIGELLOSIS
005	OTHER FOOD POISONING (BACTERIAL)
006	AMEBIASIS
007	OTHER PROTOZOAL INTESTINAL DISEASES
008	INTESTINAL INFECTIONS DUE TO OTHER ORGANISMS
009	ILL-DEFINED INTESTINAL INFECTIONS
010	PRIMARY TUBERCULOUS INFECTION
011	PULMONARY TUBERCULOSIS
012	OTHER RESPIRATORY TUBERCULOSIS
013	TUBERCULOSIS OF MENINGES AND CENTRAL NERVOUS SYSTEM
014	TUBERCULOSIS OF INTESTINES, PERITONEUM, AND MESENTERIC
015	TUBERCULOSIS OF BONES AND JOINTS
016	TUBERCULOSIS OF GENITOURINARY SYSTEM
017	TUBERCULOSIS OF OTHER ORGANS
018	MILIARY TUBERCULOSIS
020	PLAGUE
021	TULAREMIA
022	ANTHRAX
023	BRUCELLOSIS
024	GLANDERS
025	MELIOIDOSIS
026	RAT-BITE FEVER
027	OTHER ZOO NOTIC BACTERIAL DISEASES
030	LEPROSY
031	DISEASES DUE TO OTHER MYCOBACTERIA
032	DIPHTHERIA
033	WHOOPING COUGH
034	STREPTOCOCCAL SORE THROAT AND SCARLET FEVER
035	ERYSIPELAS
036	MENINGOCOCCAL INFECTION
037	TETANUS
038	SEPTICEMIA
039	ACTINOMYCOTIC INFECTIONS
040	OTHER BACTERIAL DISEASES
041	BACTERIAL INFECTION IN CONDITIONS CLASSIFIED ELSEWHERE
042	HUMAN IMMUNODEFICIENCY VIRUS (HIV) DISEASE
045	ACUTE POLIOMYELITIS
046	SLOW VIRUS INFECTION OF CENTRAL NERVOUS SYSTEM
047	MENINGITIS DUE TO ENTEROVIRUS
048	OTHER ENTEROVIRUS DISEASES OF CENTRAL NERVOUS SYSTEM
049	OTHER NON-ARTHROPOD-BORNE VIRAL DISEASES
050	SMALLPOX
051	COWPOX AND PARAVACCINIA
052	CHICKENPOX
053	HERPES ZOSTER
054	HERPES SIMPLEX
055	MEASLES
056	RUBELLA

AXIS III- PHYSICAL DIAGNOSES (con't.)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
057	OTHER VIRAL EXANTHEMATA
060	YELLOW FEVER
061	DENGUE
062	MOSQUITO-BORNE VIRAL ENCEPHALITIS
063	TICK-BORNE VIRAL ENCEPHALITIS
064	VIRAL ENCEPHALITIS TRANSMITTED BY OTHER AND UNSPECIFIED
065	ARTHROPOD-BORNE HEMORRHAGIC FEVER
066	OTHER ARTHROPOD-BORNE VIRAL DISEASES
070	VIRAL HEPATITIS
071	RABIES
072	MUMPS
073	ORNITHOSIS
074	SPECIFIC DISEASES DUE TO COXSACKIE VIRUS
075	INFECTIOUS MONONUCLEOSIS
076	TRACHOMA
077	OTHER DISEASES OF CONJUNCTIVA DUE TO VIRUSES AND CHLAMYDIA
078	OTHER DISEASES DUE TO VIRUSES AND CHLAMYDIAE
079	VIRAL AND CHLAMYDIAL INFECTION
080	LOUSE-BORNE (EPIDEMIC) TYPHUS
081	OTHER TYPHUS
082	TICK-BORNE RICKETTSIOSES
083	OTHER RICKETTSIOSES
084	MALARIA
085	LEISHMANIASIS
086	TRYPANOSOMIASIS
087	RELAPSING FEVER
088	OTHER ARTHROPOD-BORNE DISEASES
090	CONGENITAL SYPHILIS
091	EARLY SYPHILIS, SYMPTOMATIC
092	EARLY SYPHILIS, LATENT
093	CARDIOVASCULAR SYPHILIS
094	NEUROSYPHILIS
095	OTHER FORMS OF LATE SYPHILIS, WITH SYMPTOMS
096	LATE SYPHILIS, LATENT
097	OTHER AND UNSPECIFIED SYPHILIS
098	GONOCOCCAL INFECTIONS
099	OTHER VENEREAL DISEASES
100	LEPTOSPIROSIS
101	VINCENT'S ANGINA
102	YAWS
103	PINTA
104	OTHER SPIROCHETAL INFECTION
110	DERMATOPHYTOSIS
111	DERMATOMYCOSIS, OTHER AND UNSPECIFIED
112	CANDIDIASIS
114	COCCIDIOIDOMYCOSIS
115	HISTOPLASMOSIS
116	BLASTOMYCOTIC INFECTION
117	OTHER MYCOSES
118	OPPORTUNISTIC MYCOSES
120	SCHISTOSOMIASIS (BILHARZIASIS)
121	OTHER TREMATODE INFECTIONS

AXIS III- PHYSICAL DIAGNOSES (con't.)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
122	ECHINOCOCCOSIS
123	OTHER CESTODE INFECTION
124	TRICHINOSIS
125	FILARIAL INFECTION AND DRACONTIASIS
126	ANCYLOSTOMIASIS AND NECATORIASIS
127	OTHER INTESTINAL HELMINTHIASES
128	OTHER AND UNSPECIFIED HELMINTHIASES
129	INTESTINAL PARASITISM, UNSPECIFIED
130	TOXOPLASMOSIS
131	TRICHOMONIASIS
132	PEDICULOSIS AND PHTHIRUS INFESTATION
133	ACARIASIS
134	OTHER INFESTATION
135	SARCOIDOSIS
136	OTHER AND UNSPECIFIED INFECTIOUS AND PARASITIC DISEASES
137	LATE EFFECTS OF TUBERCULOSIS
138	LATE EFFECTS OF ACUTE POLIOMYELITIS
139	LATE EFFECTS OF OTHER INFECTIOUS AND PARASITIC DISEASES
140	MALIGNANT NEOPLASM OF LIP
141	MALIGNANT NEOPLASM OF TONGUE
142	MALIGNANT NEOPLASM OF MAJOR SALIVARY GLANDS
143	MALIGNANT NEOPLASM OF GUM
144	MALIGNANT NEOPLASM OF FLOOR OF MOUTH
145	MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED PARTS OF MOUTH
146	MALIGNANT NEOPLASM OF OROPHARYNX
147	MALIGNANT NEOPLASM OF NASOPHARYNX
148	MALIGNANT NEOPLASM OF HYPOPHARYNX
149	MALIGNANT NEOPLASM OF OTHER AND ILL-DEFINED SITES
150	MALIGNANT NEOPLASM OF ESOPHAGUS
151	MALIGNANT NEOPLASM OF STOMACH
152	MALIGNANT NEOPLASM OF SMALL INTESTINE, INCLUDING DUODENUM
153	MALIGNANT NEOPLASM OF COLON
154	MALIGNANT NEOPLASM OF RECTUM, RECTOSIGMOID JUNCTION
155	MALIGNANT NEOPLASM OF LIVER AND INTRAHEPATIC BILE DUCTS
156	MALIGNANT NEOPLASM OF GALLBLADDER AND EXTRAHEPATIC BILE DUCT
157	MALIGNANT NEOPLASM OF PANCREAS
158	MALIGNANT NEOPLASM OF RETROPERITONEUM AND PERITONEUM
159	MALIGNANT NEOPLASM OF OTHER AND ILL-DEFINED SITES
160	MALIGNANT NEOPLASM OF NASAL CAVITIES, MIDDLE EAR
161	MALIGNANT NEOPLASM OF LARYNX
162	MALIGNANT NEOPLASM OF TRACHEA, BRONCHUS, AND LUNG
163	MALIGNANT NEOPLASM OF PLEURA
164	MALIGNANT NEOPLASM OF THYMUS, HEART, AND MEDIASTINUM
165	MALIGNANT NEOPLASM OF OTHER AND ILL-DEFINED SITES
170	MALIGNANT NEOPLASM OF BONE AND ARTICULAR CARTILAGE
171	MALIGNANT NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE
172	MALIGNANT MELANOMA OF SKIN
173	OTHER MALIGNANT NEOPLASM OF SKIN
174	MALIGNANT NEOPLASM OF FEMALE BREAST
175	MALIGNANT NEOPLASM OF MALE BREAST
176	KAPOSI'S SARCOMA
179	MALIGNANT NEOPLASM OF UTERUS, PART UNSPECIFIED

AXIS III- PHYSICAL DIAGNOSES (con't.)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
180	MALIGNANT NEOPLASM OF CERVIX UTERI
181	MALIGNANT NEOPLASM OF PLACENTA
182	MALIGNANT NEOPLASM OF BODY OF UTERUS
183	MALIGNANT NEOPLASM OF OVARY AND OTHER UTERINE ADNEXA
184	MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED FEMALE GENITAL
185	MALIGNANT NEOPLASM OF PROSTATE
186	MALIGNANT NEOPLASM OF TESTIS
187	MALIGNANT NEOPLASM OF PENIS AND OTHER MALE GENITAL ORGANS
188	MALIGNANT NEOPLASM OF BLADDER
189	MALIGNANT NEOPLASM OF KIDNEY
190	MALIGNANT NEOPLASM OF EYE
191	MALIGNANT NEOPLASM OF BRAIN
192	MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED PARTS
193	MALIGNANT NEOPLASM OF THYROID GLAND
194	MALIGNANT NEOPLASM OF OTHER ENDOCRINE GLANDS
195	MALIGNANT NEOPLASM OF OTHER AND ILL-DEFINED SITES
196	SECONDARY AND UNSPECIFIED MALIGNANT NEOPLASM OF LYMPH NODE
197	SECONDARY MALIGNANT NEOPLASM OF RESPIRATORY AND DIGESTIVE
198	SECONDARY MALIGNANT NEOPLASM OF OTHER SPECIFIED SITES
199	MALIGNANT NEOPLASM WITHOUT SPECIFICATION OF SITE
200	LYMPHOSARCOMA AND RETICULOSARCOMA
201	HODGKIN'S DISEASE
202	OTHER MALIGNANT NEOPLASMS OF LYMPHOID AND HISTIOCYTIC TISSUE
203	MULTIPLE MYELOMA AND IMMUNOPROLIFERATIVE NEOPLASMS
204	LYMPHOID LEUKEMIA
205	MYELOID LEUKEMIA
206	MONOCYTIC LEUKEMIA
207	OTHER SPECIFIED LEUKEMIA
208	LEUKEMIA OF UNSPECIFIED CELL TYPE
210	BENIGN NEOPLASM OF LIP, ORAL CAVITY, AND PHARYNX
211	BENIGN NEOPLASM OF OTHER PARTS OF DIGESTIVE SYSTEM
212	BENIGN NEOPLASM OF RESPIRATORY AND INTRATHORACIC ORGANS
213	BENIGN NEOPLASM OF BONE AND ARTICULAR CARTILAGE
214	LIPOMA
215	OTHER BENIGN NEOPLASM OF CONNECTIVE AND OTHER SOFT TISSUE
216	BENIGN NEOPLASM OF SKIN
217	BENIGN NEOPLASM OF BREAST
218	UTERINE LEIOMYOMA
219	OTHER BENIGN NEOPLASM OF UTERUS
220	BENIGN NEOPLASM OF OVARY
221	BENIGN NEOPLASM OF OTHER FEMALE GENITAL ORGANS
222	BENIGN NEOPLASM OF MALE GENITAL ORGANS
223	BENIGN NEOPLASM OF KIDNEY AND OTHER URINARY ORGANS
224	BENIGN NEOPLASM OF EYE
225	BENIGN NEOPLASM OF BRAIN AND OTHER PARTS OF NERVOUS SYSTEM
226	BENIGN NEOPLASM OF THYROID GLANDS
227	BENIGN NEOPLASM OF OTHER ENDOCRINE GLANDS
228	HEMANGIOMA AND LYMPHANGIOMA, ANY SITE
229	BENIGN NEOPLASM OF OTHER AND UNSPECIFIED SITES
230	CARCINOMA IN SITU OF DIGESTIVE ORGANS
231	CARCINOMA IN SITU OF RESPIRATORY SYSTEM
232	CARCINOMA IN SITU OF SKIN

AXIS III- PHYSICAL DIAGNOSES (con't.)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
233	CARCINOMA IN SITU OF BREAST AND GENITOURINARY SYSTEM
234	CARCINOMA IN SITU OF OTHER AND UNSPECIFIED SITES
235	NEOPLASM OF UNCERTAIN BEHAVIOR OF DIGESTIVE AND RESPIRATOR
236	NEOPLASM OF UNCERTAIN BEHAVIOR OF GENITOURINARY ORGANS
237	NEOPLASM OF UNCERTAIN BEHAVIOR OF ENDOCRINE GLANDS
238	NEOPLASM OF UNCERTAIN BEHAVIOR OF OTHER
239	NEOPLASMS OF UNSPECIFIED NATURE
240	SIMPLE AND UNSPECIFIED GOITER
241	NONTOXIC NODULAR GOITER
242	THYROTOXICOSIS WITH OR WITHOUT GOITER
243	CONGENITAL HYPOTHYROIDISM
244	ACQUIRED HYPOTHYROIDISM
245	THYROIDITIS
246	OTHER DISORDERS OF THYROID
250	DIABETES MELLITUS
251	OTHER DISORDERS OF PANCREATIC INTERNAL SECRETION
252	DISORDERS OF PARATHYROID GLAND
253	DISORDERS OF THE PITUITARY GLAND
254	DISEASES OF THYMUS GLAND
255	DISORDERS OF ADRENAL GLANDS
256	OVARIAN DYSFUNCTION
257	TESTICULAR DYSFUNCTION
258	POLYGLANDULAR DYSFUNCTION AND RELATED DISORDERS
259	OTHER ENDOCRINE DISORDERS
260	KWASHIORKOR
261	NUTRITIONAL MARASMUS
262	OTHER SEVERE PROTEIN-CALORIE MALNUTRITION
263	OTHER AND UNSPECIFIED PROTEIN-CALORIE MALNUTRITION
264	VITAMIN A DEFICIENCY
265	THIAMINE AND NIACIN DEFICIENCY STATES
266	DEFICIENCY OF B-COMPLEX COMPONENTS
267	ASCORBIC ACID DEFICIENCY
268	VITAMIN D DEFICIENCY
269	OTHER NUTRITIONAL DEFICIENCIES
270	DISORDERS OF AMINO-ACID TRANSPORT AND METABOLISM
271	DISORDERS OF CARBOHYDRATE TRANSPORT AND METABOLISM
272	DISORDERS OF LIPOID METABOLISM
273	DISORDERS OF PLASMA PROTEIN METABOLISM
274	GOUT
275	DISORDERS OF MINERAL METABOLISM
276	DISORDERS OF FLUID, ELECTROLYTE, AND ACID-BASE BALANCE
277	OTHER AND UNSPECIFIED DISORDERS OF METABOLISM
278	OBESITY AND OTHER HYPERALIMENTATION
279	DISORDERS INVOLVING THE IMMUNE MECHANISM
280	IRON DEFICIENCY ANEMIAS
281	OTHER DEFICIENCY ANEMIAS
282	HEREDITARY HEMOLYTIC ANEMIAS
283	ACQUIRED HEMOLYTIC ANEMIAS
284	APLASTIC ANEMIA
285	OTHER AND UNSPECIFIED ANEMIAS
286	COAGULATION DEFECTS
287	PURPURA AND OTHER HEMORRHAGIC CONDITIONS
288	DISEASES OF WHITE BLOOD CELLS

AXIS III- PHYSICAL DIAGNOSES (con't.)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
289	OTHER DISEASES OF BLOOD AND BLOOD-FORMING ORGANS
320	BACTERIAL MENINGITIS
321	MENINGITIS DUE TO OTHER ORGANISMS
322	MENINGITIS OF UNSPECIFIED CAUSE
323	ENCEPHALITIS, MYELITIS, AND ENCEPHALOMYELITIS
324	INTRACRANIAL AND INTRASPINAL ABSCESS
325	PHLEBITIS AND THROMBOPHLEBITIS OF INTRACRANIAL VENOUS SINUS
326	LATE EFFECTS OF INTRACRANIAL ABSCESS OR PYOGENIC INFECTION
330	CEREBRAL DEGENERATIONS USUALLY MANIFEST IN CHILDHOOD
331	OTHER CEREBRAL DEGENERATIONS
332	PARKINSON'S DISEASE
333	OTHER EXTRAPYRAMIDAL DISEASE AND ABNORMAL MOVEMENT DISORDER
334	SPINOCEREBELLAR DISEASE
335	ANTERIOR HORN CELL DISEASE
336	OTHER DISEASES OF SPINAL CORD
337	DISORDERS OF THE AUTONOMIC NERVOUS SYSTEM
340	MULTIPLE SCLEROSIS
341	OTHER DEMYELINATING DISEASES OF CENTRAL NERVOUS SYSTEM
342	HEMIPLEGIA AND HEMIPARESIS
343	INFANTILE CEREBRAL PALSY
344	OTHER PARALYTIC SYNDROMES
345	EPILEPSY
346	MIGRAINE
348	OTHER CONDITIONS OF BRAIN
349	OTHER AND UNSPECIFIED DISORDERS OF THE NERVOUS SYSTEM
350	TRIGEMINAL NERVE DISORDERS
351	FACIAL NERVE DISORDERS
352	DISORDERS OF OTHER CRANIAL NERVES
353	NERVE ROOT AND PLEXUS DISORDERS
354	MONONEURITIS OF UPPER LIMB AND MONONEURITIS MULTIPLEX
355	MONONEURITIS OF LOWER LIMB AND UNSPECIFIED SITE
356	HEREDITARY AND IDIOPATHIC PERIPHERAL NEUROPATHY
357	INFLAMMATORY AND TOXIC NEUROPATHY
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359	MUSCULAR DYSTROPHIES AND OTHER MYOPATHIES
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361	RETINAL DETACHMENTS AND DEFECTS
362	OTHER RETINAL DISORDERS
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364	DISORDERS OF IRIS AND CILIARY BODY
365	GLAUCOMA
366	CATARACT
367	DISORDERS OF REFRACTION AND ACCOMMODATION
368	VISUAL DISTURBANCES
369	BLINDNESS AND LOW VISION
370	KERATITIS
371	CORNEAL OPACITY AND OTHER DISORDERS OF CORNEA
372	DISORDERS OF CONJUNCTIVA
373	INFLAMMATION OF EYELIDS
374	OTHER DISORDERS OF EYELIDS
375	DISORDERS OF LACRIMAL SYSTEM
376	DISORDERS OF THE ORBIT
377	DISORDERS OF OPTIC NERVE AND VISUAL PATHWAYS

AXIS III-PHYSICAL DIAGNOSES (*con't.*)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
378	STRABISMUS AND OTHER DISORDERS OF BINOCULAR EYE MOVEMENTS
379	OTHER DISORDERS OF EYE
380	DISORDERS OF EXTERNAL EAR
381	NONSUPPURATIVE OTITIS MEDIA AND EUSTACHIAN TUBE DISORDERS
382	SUPPURATIVE AND UNSPECIFIED OTITIS MEDIA
383	MASTOIDITIS AND RELATED CONDITIONS
384	OTHER DISORDERS OF TYMPANIC MEMBRANE
385	OTHER DISORDERS OF MIDDLE EAR AND MASTOID
386	VERTIGINOUS SYNDROMES AND OTHER DISORDERS OF VESTIBULAR
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389	HEARING LOSS
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391	RHEUMATIC FEVER WITH HEART INVOLVEMENT
392	RHEUMATIC CHOREA
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395	DISEASES OF AORTIC VALVE
396	DISEASES OF MITRAL AND AORTIC VALVES
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398	OTHER RHEUMATIC HEART DISEASE
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402	HYPERTENSIVE HEART DISEASE
403	HYPERTENSIVE RENAL DISEASE
404	HYPERTENSIVE HEART AND RENAL DISEASE
405	ECONDARY HYPERTENSION
410	ACUTE MYOCARDIAL INFARCTION
411	OTHER ACUTE AND SUBACUTE FORMS OF ISCHEMIC HEART DISEASE
412	OLD MYOCARDIAL INFARCTION
413	ANGINA PECTORIS
414	OTHER FORMS OF CHRONIC ISCHEMIC HEART DISEASE
415	ACUTE PULMONARY HEART DISEASE
416	CHRONIC PULMONARY HEART DISEASE
417	OTHER DISEASES OF PULMONARY CIRCULATION
420	ACUTE PERICARDITIS
421	ACUTE AND SUBACUTE ENDOCARDITIS
422	ACUTE MYOCARDITIS
423	OTHER DISEASES OF PERICARDIUM
424	OTHER DISEASES OF ENDOCARDIUM
425	CARDIOMYOPATHY
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437	OTHER AND ILL-DEFINED CEREBROVASCULAR DISEASE
438	LATE EFFECTS OF CEREBROVASCULAR DISEASE

AXIS III-PHYSICAL DIAGNOSES (*con't.*)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
440	ATHEROSCLEROSIS
441	AORTIC ANEURYSM AND DISSECTION
442	OTHER ANEURYSM
443	OTHER PERIPHERAL
444	ARTERIAL EMBOLISM AND THROMBOSIS
446	POLYARTERITIS NODOSA AND ALLIED CONDITIONS
447	OTHER DISORDERS OF ARTERIES AND ARTERIOLES
448	DISEASE OF CAPILLARIES
451	PHLEBITIS AND THROMBOPHLEBITIS
452	PORTAL VEIN THROMBOSIS
453	OTHER VENOUS EMBOLISM AND THROMBOSIS
454	VARICOSE VEINS OF LOWER EXTREMITIES
455	HEMORRHOIDS
456	VARICOSE VEINS OF OTHER SITES
457	NONINFECTIOUS DISORDERS OF LYMPHATIC CHANNELS
458	HYPOTENSION
459	OTHER DISORDERS OF CIRCULATORY SYSTEM
460	ACUTE NASOPHARYNGITIS (COMMON COLD)
461	ACUTE SINUSITIS
462	ACUTE PHARYNGITIS
463	ACUTE TONSILLITIS
464	ACUTE LARYNGITIS AND TRACHEITIS
465	ACUTE UPPER RESPIRATORY INFECTIONS OF MULTIPLE OR UNSPECIFIED SITES
466	ACUTE BRONCHITIS AND BRONCHIOLITIS
470	DEVIATED NASAL SEPTUM
471	NASAL POLYPS
472	CHRONIC PHARYNGITIS AND NASOPHARYNGITIS
473	CHRONIC SINUSITIS
474	CHRONIC DISEASE OF TONSILS AND ADENOIDS
475	PERITONSILLAR ABSCESS
476	CHRONIC LARYNGITIS AND LARYNGOTRACHEITIS
477	ALLERGIC RHINITIS
478	OTHER DISEASES OF UPPER RESPIRATORY TRACT
480	VIRAL PNEUMONIA
481	PNEUMOCOCCAL PNEUMONIA [STREPTOCOCCUS PNEUMONIAE PNEUMONIA]
482	OTHER BACTERIAL PNEUMONIA
483	PNEUMONIA DUE TO OTHER SPECIFIED ORGANISM
484	PNEUMONIA IN INFECTIOUS DISEASES CLASSIFIED ELSEWHERE
485	BRONCHOPNEUMONIA, ORGANISM UNSPECIFIED
486	PNEUMONIA, ORGANISM UNSPECIFIED
487	INFLUENZA
490	BRONCHITIS, NOT SPECIFIED AS ACUTE OR CHRONIC
491	CHRONIC BRONCHITIS
492	EMPHYSEMA
493	ASTHMA
494	BRONCHIECTASIS
495	EXTRINSIC ALLERGIC ALVEOLITIS
496	CHRONIC AIRWAY OBSTRUCTION, NOT ELSEWHERE CLASSIFIED
500	COAL WORKERS' PNEUMOCONIOSIS
501	ASBESTOSIS
502	PNEUMOCONIOSIS DUE TO OTHER SILICA OR SILICATES
503	PNEUMOCONIOSIS DUE TO OTHER INORGANIC DUST
504	PNEUMONOPATHY DUE TO INHALATION OF OTHER DUST

AXIS III-PHYSICAL DIAGNOSES (*con't.*)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
505	PNEUMOCONIOSIS, UNSPECIFIED
506	RESPIRATORY CONDITIONS DUE TO CHEMICAL FUMES AND VAPORS
507	PNEUMONITIS DUE TO SOLIDS AND LIQUIDS
508	RESPIRATORY CONDITIONS DUE TO OTHER UNSPECIFIED EXTERNAL AGENTS
510	EMPHYEMA
511	PLEURISY
512	PNEUMOTHORAX
513	ABSCESS OF LUNG AND MEDIASTINUM
514	PULMONARY CONGESTION AND HYPOSTASIS
515	POSTINFLAMMATORY PULMONARY FIBROSIS
516	OTHER ALVEOLAR AND PARIETOALVEOLAR PNEUMONOPATHY
517	LUNG INVOLVEMENT IN CONDITIONS CLASSIFIED ELSEWHERE
518	OTHER DISEASES OF LUNG
519	OTHER DISEASES OF RESPIRATORY SYSTEM
520	DISORDERS OF TOOTH DEVELOPMENT AND ERUPTION
521	DISEASES OF HARD TISSUES OF TEETH
522	DISEASES OF PULP AND PERIAPICAL TISSUES
523	GINGIVAL AND PERIODONTAL DISEASES
524	DENTOFACIAL ANOMALIES, INCLUDING MALOCCLUSION
525	OTHER DISEASES AND CONDITIONS OF THE TEETH
526	DISEASES OF THE JAWS
527	DISEASES OF THE SALIVARY GLANDS
528	DISEASES OF THE ORAL SOFT TISSUES, EXCLUDING LESIONS SPECIFIC FOR GIN
529	DISEASES AND OTHER CONDITIONS OF THE TONGUE
530	DISEASES OF ESOPHAGUS
531	GASTRIC ULCER
532	DUODENAL ULCER
533	PEPTIC ULCER, SITE UNSPECIFIED
534	GASTROJEJUNAL ULCER
535	GASTRITIS AND DUODENITIS
536	DISORDERS OF FUNCTION OF STOMACH
537	OTHER DISORDERS OF STOMACH AND DUODENUM
540	ACUTE APPENDICITIS
541	APPENDICITIS, UNQUALIFIED
542	OTHER APPENDICITIS
543	OTHER DISEASES OF APPENDIX
550	INGUINAL HERNIA
551	OTHER HERNIA OF ABDOMINAL CAVITY, WITH GANGRENE
552	OTHER HERNIA OF ABDOMINAL CAVITY, WITH OBSTRUCTION
553	OTHER HERNIA OF ABDOMINAL CAVITY WITHOUT MENTION OF OBSTRUCTION
555	REGIONAL ENTERITIS
556	ULCERATIVE ENTEROCOLITIS
557	VASCULAR INSUFFICIENCY OF INTESTINE
558	OTHER NONINFECTIOUS GASTROENTERITIS AND COLITIS
560	INTESTINAL OBSTRUCTION WITHOUT MENTION OF HERNIA
562	DIVERTICULA OF INTESTINE
564	FUNCTIONAL DIGESTIVE DISORDERS, NOT ELSEWHERE CLASSIFIED
565	ANAL FISSURE AND FISTULA
566	ABSCESS OF ANAL AND RECTAL REGIONS
567	PERITONITIS
568	OTHER DISORDERS OF PERITONEUM
569	OTHER DISORDERS OF INTESTINE
570	ACUTE AND SUBACUTE NECROSIS OF LIVER

AXIS III-PHYSICAL DIAGNOSES (*con't.*)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
571	CHRONIC LIVER DISEASE AND CIRRHOSIS
572	LIVER ABSCESS AND SEQUELAE OF CHRONIC LIVER DISEASE
573	OTHER DISORDERS OF LIVER
574	CHOLELITHIASIS
575	OTHER DISORDERS OF GALLBLADDER
576	OTHER DISORDERS OF BILIARY TRACT
577	DISEASES OF PANCREAS
578	GASTROINTESTINAL HEMORRHAGE
579	INTESTINAL MALABSORPTION
580	ACUTE GLOMERULONEPHRITIS
581	NEPHROTIC SYNDROME
582	CHRONIC GLOMERULONEPHRITIS
583	NEPHRITIS AND NEPHROPATHY, NOT SPECIFIED AS ACUTE OR CHRONIC
584	ACUTE RENAL FAILURE
585	CHRONIC RENAL FAILURE
586	RENAL FAILURE, UNSPECIFIED
587	RENAL SCLEROSIS, UNSPECIFIED
588	DISORDERS RESULTING FROM IMPAIRED RENAL FUNCTION
589	SMALL KIDNEY OF UNKNOWN CAUSE
590	INFECTIONS OF KIDNEY
591	HYDRONEPHROSIS
592	CALCULUS OF KIDNEY AND URETER
593	OTHER DISORDERS OF KIDNEY AND URETER
594	CALCULUS OF LOWER URINARY TRACT
595	CYSTITIS
596	OTHER DISORDERS OF BLADDER
597	URETHRITIS, NOT SEXUALLY TRANSMITTED, AND URETHRAL SYNDROME
598	URETHRAL STRICTURE
599	OTHER DISORDERS OF URETHRA AND URINARY TRACT
600	HYPERPLASIA OF PROSTATE
601	INFLAMMATORY DISEASES OF PROSTATE
602	OTHER DISORDERS OF PROSTATE
603	HYDROCELE
604	ORCHITIS AND EPIDIDYMITIS
605	REDUNDANT PREPUCE AND PHIMOSIS
606	INFERTILITY, MALE
607	DISORDERS OF PENIS
608	OTHER DISORDERS OF MALE GENITAL ORGANS
610	BENIGN MAMMARY DYSPLASIAS
611	OTHER DISORDERS OF BREAST
614	INFLAMMATORY DISEASE OF OVARY, FALLOPIAN TUBE, PELVIC CELLULAR TISSUE
615	INFLAMMATORY DISEASES OF UTERUS, EXCEPT CERVIX
616	INFLAMMATORY DISEASE OF CERVIX, VAGINA, AND VULVA
617	ENDOMETRIOSIS
618	GENITAL PROLAPSE619 FISTULA INVOLVING FEMALE GENITAL TRACT
620	NONINFLAMMATORY DISORDERS OF OVARY, FALLOPIAN TUBE
621	DISORDERS OF UTERUS, NOT ELSEWHERE CLASSIFIED
622	NONINFLAMMATORY DISORDERS OF CERVIX
623	NONINFLAMMATORY DISORDERS OF VAGINA
624	NONINFLAMMATORY DISORDERS OF VULVA AND PERINEUM
625	PAIN AND OTHER SYMPTOMS ASSOCIATED WITH FEMALE GENITAL ORGANS
626	DISORDERS OF MENSTRUATION AND OTHER ABNORMAL BLEEDING

AXIS III- PHYSICAL DIAGNOSES (con't.)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
627	MENOPAUSAL AND POSTMENOPAUSAL DISORDERS
628	INFERTILITY, FEMALE
629	OTHER DISORDERS OF FEMALE GENITAL ORGANS
630	HYDATIDIFORM MOLE
631	OTHER ABNORMAL PRODUCT OF CONCEPTION
632	MISSED ABORTION
633	ECTOPIC PREGNANCY
634	SPONTANEOUS ABORTION
635	LEGALLY INDUCED ABORTION
636	ILLEGAL ABORTION
637	UNSPECIFIED ABORTION
638	FAILED ATTEMPTED ABORTION
639	COMPLICATIONS FOLLOWING ABORTION AND ECTOPIC/MOLAR PREGNANCIES
640	HEMORRHAGE IN EARLY PREGNANCY
641	ANTEPARTUM HEMORRHAGE, ABRUPTIO PLACENTAE, AND PLACENTA PREVIA
642	HYPERTENSION COMPLICATING PREGNANCY
643	EXCESSIVE VOMITING IN PREGNANCY
644	EARLY OR THREATENED LABOR
645	PROLONGED PREGNANCY
646	OTHER COMPLICATIONS OF PREGNANCY, NOT ELSEWHERE CLASSIFIED
647	INFECTIOUS AND PARASITIC CONDITIONS IN THE MOTHER
648	OTHER CURRENT CONDITIONS IN THE MOTHER CLASSIFIABLE ELSEWHERE
650	NORMAL DELIVERY
651	MULTIPLE GESTATION
652	MALPOSITION AND MALPRESENTATION OF FETUS
653	DISPROPORTION IN PREGNANCY, LABOR, AND DELIVERY
654	ABNORMALITY OF ORGANS AND SOFT TISSUES OF PELVIS
655	KNOWN OR SUSPECTED FETAL ABNORMALITY AFFECTING MGMT. OF MOTHER
656	OTHER FETAL AND PLACENTAL PROBLEMS AFFECTING MGMT. OF MOTHER
657	POLYHYDRAMNIOS
658	OTHER PROBLEMS ASSOCIATED WITH AMNIOTIC CAVITY AND MEMBRANES
659	OTHER INDICATIONS FOR CARE OR INTERVENTION RELATED TO LABOR
660	OBSTRUCTED LABOR
661	ABNORMALITY OF FORCES OF LABOR
662	LONG LABOR
663	UMBILICAL CORD COMPLICATIONS DURING LABOR AND DELIVERY
664	TRAUMA TO PERINEUM AND VULVA DURING DELIVERY
665	OTHER OBSTETRICAL TRAUMA
666	POSTPARTUM HEMORRHAGE
667	RETAINED PLACENTA OR MEMBRANES, WITHOUT HEMORRHAGE
668	COMPLICATIONS OF THE ADMINISTRATION OF ANESTHETIC
669	OTHER COMPLICATIONS OF LABOR AND DELIVERY
670	MAJOR PUERPERAL INFECTION
671	VENOUS COMPLICATIONS IN PREGNANCY AND THE PUERPERIUM
672	PYREXIA OF UNKNOWN ORIGIN DURING THE PUERPERIUM
673	OBSTETRICAL PULMONARY EMBOLISM
674	OTHER AND UNSPECIFIED COMPLICATIONS OF THE PUERPERIUM
675	INFECTIONS OF THE BREAST AND NIPPLE ASSOCIATED WITH CHILDBIRTH
676	OTHER DISORDERS OF THE BREAST ASSOCIATED WITH CHILDBIRTH
677	LATE EFFECT OF COMPLICATION OF PREGNANCY, CHILDBIRTH
680	CARBUNCLE AND FURUNCLE

AXIS III- PHYSICAL DIAGNOSES (con't.)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
681	CELLULITIS AND ABSCESS OF FINGER AND TOE
682	OTHER CELLULITIS AND ABSCESS
683	ACUTE LYMPHADENITIS
684	IMPETIGO
685	PILONIDAL CYST
686	OTHER LOCAL INFECTIONS OF SKIN AND SUBCUTANEOUS TISSUE
690	ERYTHEMATOSQUAMOUS DERMATOSIS
691	ATOPIC DERMATITIS AND RELATED CONDITIONS
692	CONTACT DERMATITIS AND OTHER ECZEMA
693	DERMATITIS DUE TO SUBSTANCES TAKEN INTERNALLY
694	BULLOUS DERMATOSES
695	ERYTHEMATOUS CONDITIONS
696	PSORIASIS AND SIMILAR DISORDERS
697	LICHEN
698	PRURITUS AND RELATED CONDITIONS
700	CORNS AND CALLOSITIES
701	OTHER HYPERTROPHIC AND ATROPHIC CONDITIONS OF SKIN
702	OTHER DERMATOSES
703	DISEASES OF NAIL
704	DISEASES OF HAIR AND HAIR FOLLICLES
705	DISORDERS OF SWEAT GLANDS
706	DISEASES OF SEBACEOUS GLANDS
707	CHRONIC ULCER OF SKIN
708	URTICARIA
709	OTHER DISORDERS OF SKIN AND SUBCUTANEOUS TISSUE
710	DIFFUSE DISEASES OF CONNECTIVE TISSUE
711	ARTHROPATHY ASSOCIATED WITH INFECTIONS
712	CRYSTAL ARTHROPATHIES
713	ARTHROPATHY ASSOCIATED WITH OTHER DISORDERS CLASSIFIED ELSEWHERE
714	RHEUMATOID ARTHRITIS AND OTHER INFLAMMATORY POLYARTHROPATHIES
715	OSTEOARTHRITIS AND ALLIED DISORDERS
716	OTHER AND UNSPECIFIED ARTHROPATHIES
717	INTERNAL DERANGEMENT OF KNEE
718	OTHER DERANGEMENT OF JOINT
719	OTHER AND UNSPECIFIED DISORDERS OF JOINT
720	ANKYLOSING SPONDYLITIS AND OTHER INFLAMMATORY SPONDYLOPATHIES
721	SPONDYLOSIS AND ALLIED DISORDERS
722	INTERVERTEBRAL DISC DISORDERS
723	OTHER DISORDERS OF CERVICAL REGION
724	OTHER AND UNSPECIFIED DISORDERS OF BACK
725	POLYMYALGIA RHEUMATICA
726	PERIPHERAL ENTHESOPATHIES AND ALLIED SYNDROMES
727	OTHER DISORDERS OF SYNOVIUM, TENDON, AND BURSA
728	DISORDERS OF MUSCLE, LIGAMENT, AND FASCIA
729	OTHER DISORDERS OF SOFT TISSUES
730	OSTEOMYELITIS, PERIOSTITIS, AND OTHER INFECTIONS INVOLVING BONE
731	OSTEITIS DEFORMANS/OSTEOPATHIES ASSOCIATED WITH OTHER DISORDERS
732	OSTEOCHONDROPATHIES
733	OTHER DISORDERS OF BONE AND CARTILAGE
734	FLAT FOOT
735	ACQUIRED DEFORMITIES OF TOE
736	OTHER ACQUIRED DEFORMITIES OF LIMBS
737	CURVATURE OF SPINE

AXIS III- PHYSICAL DIAGNOSES (con't.)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
738	OTHER ACQUIRED MUSCULOSKELETAL DEFORMITY
739	NONALLOPATHIC LESIONS, NOT ELSEWHERE CLASSIFIED
740	ANENCEPHALUS AND SIMILAR ANOMALIES
741	SPINA BIFIDA
742	OTHER CONGENITAL ANOMALIES OF NERVOUS SYSTEM
743	CONGENITAL ANOMALIES OF EYE
744	CONGENITAL ANOMALIES OF EAR, FACE, AND NECK
745	BULBUS CORDIS ANOMALIES AND ANOMALIES OF CARDIAC SEPTAL CLOSURE
746	OTHER CONGENITAL ANOMALIES OF HEART
747	OTHER CONGENITAL ANOMALIES OF CIRCULATORY SYSTEM
748	CONGENITAL ANOMALIES OF RESPIRATORY SYSTEM
749	CLEFT PALATE AND CLEFT LIP
750	OTHER CONGENITAL ANOMALIES OF UPPER ALIMENTARY TRACT
751	OTHER CONGENITAL ANOMALIES OF DIGESTIVE SYSTEM
752	CONGENITAL ANOMALIES OF GENITAL ORGANS
753	CONGENITAL ANOMALIES OF URINARY SYSTEM
754	CERTAIN CONGENITAL MUSCULOSKELETAL DEFORMITIES
755	OTHER CONGENITAL ANOMALIES OF LIMBS
756	OTHER CONGENITAL MUSCULOSKELETAL ANOMALIES
757	CONGENITAL ANOMALIES OF THE INTEGUMENT
758	CHROMOSOMAL ANOMALIES
759	OTHER AND UNSPECIFIED CONGENITAL ANOMALIES
760	FETUS OR NEWBORN AFFECTED BY MATERNAL CONDITIONS
761	FETUS/NEWBORN AFFECTED BY MATERNAL COMPLICATIONS OF PREGNANCY
762	FETUS OR NEWBORN AFFECTED BY COMPLICATIONS OF PLACENTA & CORD
763	FETUS OR NEWBORN AFFECTED BY OTHER COMPLICATIONS OF LABOR
764	SLOW FETAL GROWTH AND FETAL MALNUTRITION
765	DISORDERS RELATING TO SHORT GESTATION AND LOW BIRTHWEIGHT
766	DISORDERS RELATING TO LONG GESTATION AND HIGH BIRTHWEIGHT
767	BIRTH TRAUMA
768	INTRAUTERINE HYPOXIA AND BIRTH ASPHYXIA
769	RESPIRATORY DISTRESS SYNDROME IN NEWBORN
770	OTHER RESPIRATORY CONDITIONS OF FETUS AND NEWBORN
771	INFECTIONS SPECIFIC TO THE PERINATAL PERIOD
772	FETAL AND NEONATAL HEMORRHAGE
773	HEMOLYTIC DISEASE OF FETUS OR NEWBORN, DUE TO ISOIMMUNIZATION
774	OTHER PERINATAL JAUNDICE
775	ENDOCRINE/METABOLIC DISTURBANCES SPECIFIC TO THE FETUS/NEWBORN
776	HEMATOLOGICAL DISORDERS OF FETUS AND NEWBORN
777	PERINATAL DISORDERS OF DIGESTIVE SYSTEM
778	CONDITIONS INVOLVING THE INTEGUMENT AND TEMPERATURE REGULATION
779	OTHER AND ILL-DEFINED CONDITIONS ORIGINATING IN THE PERINATAL PERIOD
780	GENERAL SYMPTOMS
781	SYMPTOMS INVOLVING NERVOUS AND MUSCULOSKELETAL SYSTEMS
782	SYMPTOMS INVOLVING SKIN AND OTHER INTEGUMENTARY TISSUE
783	SYMPTOMS CONCERNING NUTRITION, METABOLISM, AND DEVELOPMENT
784	SYMPTOMS INVOLVING HEAD AND NECK
785	SYMPTOMS INVOLVING CARDIOVASCULAR SYSTEM
786	SYMPTOMS INVOLVING RESPIRATORY SYSTEM AND OTHER CHEST SYMPTOMS
787	SYMPTOMS INVOLVING DIGESTIVE SYSTEM

AXIS III- PHYSICAL DIAGNOSES (con't.)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
788	SYMPTOMS INVOLVING URINARY SYSTEM
789	OTHER SYMPTOMS INVOLVING ABDOMEN AND PELVIS
790	NONSPECIFIC FINDINGS ON EXAMINATION OF BLOOD
791	NONSPECIFIC FINDINGS ON EXAMINATION OF URINE
792	NONSPECIFIC ABNORMAL FINDINGS IN OTHER BODY SUBSTANCES
793	NONSPECIFIC ABNORMAL FINDINGS ON RADIOLOGICAL
794	NONSPECIFIC ABNORMAL RESULTS OF FUNCTION STUDIES
795	NONSPECIFIC ABNORMAL HISTOLOGICAL AND IMMUNOLOGICAL FINDINGS
796	OTHER NONSPECIFIC ABNORMAL FINDINGS
797	SENILITY WITHOUT MENTION OF PSYCHOSIS
798	SUDDEN DEATH, CAUSE UNKNOWN
799	OTHER ILL-DEFINED AND UNKNOWN CAUSES OF MORBIDITY AND MORTALITY
800	FRACTURE OF VAULT OF SKULL
801	FRACTURE OF BASE OF SKULL
802	FRACTURE OF FACE BONES
803	OTHER AND UNQUALIFIED SKULL FRACTURES
804	MULTIPLE FRACTURES INVOLVING SKULL OR FACE WITH OTHER BONES
805	FRACTURE OF VERTEBRAL COLUMN WITHOUT MENTION OF SPINAL CORD INJ.
806	FRACTURE OF VERTEBRAL COLUMN WITH SPINAL CORD INJURY
807	FRACTURE OF RIB(S), STERNUM, LARYNX, AND TRACHEA
808	FRACTURE OF PELVIS
809	ILL-DEFINED FRACTURES OF BONES OF TRUNK
810	FRACTURE OF CLAVICLE
811	FRACTURE OF SCAPULA
812	FRACTURE OF HUMERUS
813	FRACTURE OF RADIUS AND ULNA
814	FRACTURE OF CARPAL BONE(S)
815	FRACTURE OF METACARPAL BONE(S)
816	FRACTURE OF ONE OR MORE PHALANGES OF HAND
817	MULTIPLE FRACTURES OF HAND BONES
818	ILL-DEFINED FRACTURES OF UPPER LIMB
819	MULTIPLE FRACTURES INVOLVING BOTH UPPER LIMBS
820	FRACTURE OF NECK OF FEMUR
821	FRACTURE OF OTHER AND UNSPECIFIED PARTS OF FEMUR
822	FRACTURE OF PATELLA
823	FRACTURE OF TIBIA AND FIBULA
824	FRACTURE OF ANKLE
825	FRACTURE OF ONE OR MORE TARSAL AND METATARSAL BONES
826	FRACTURE OF ONE OR MORE PHALANGES OF FOOT
827	OTHER, MULTIPLE, AND ILL-DEFINED FRACTURES OF LOWER LIMB
828	MULTIPLE FRACTURES INVOLVING BOTH LOWER LIMBS
829	FRACTURE OF UNSPECIFIED BONES
830	DISLOCATION OF JAW
831	DISLOCATION OF SHOULDER
832	DISLOCATION OF ELBOW
833	DISLOCATION OF WRIST
834	DISLOCATION OF FINGER
835	DISLOCATION OF HIP
836	DISLOCATION OF KNEE
837	DISLOCATION OF ANKLE
838	DISLOCATION OF FOOT
839	OTHER, MULTIPLE, AND ILL-DEFINED DISLOCATIONS

AXIS III- PHYSICAL DIAGNOSES (con't.)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
840	SPRAINS AND STRAINS OF SHOULDER AND UPPER ARM
841	SPRAINS AND STRAINS OF ELBOW AND FOREARM
842	SPRAINS AND STRAINS OF WRIST AND HAND
843	SPRAINS AND STRAINS OF HIP AND THIGH
844	SPRAINS AND STRAINS OF KNEE AND LEG
845	SPRAINS AND STRAINS OF ANKLE AND FOOT
846	SPRAINS AND STRAINS OF SACROILIAC REGION
847	SPRAINS AND STRAINS OF OTHER AND UNSPECIFIED PARTS OF BACK
848	OTHER AND ILL-DEFINED SPRAINS AND STRAINS
850	CONCUSSION
851	CEREBRAL LACERATION AND CONTUSION
852	SUBARACHNOID, SUBDURAL, AND EXTRADURAL HEMORRHAGE
853	OTHER AND UNSPECIFIED INTRACRANIAL HEMORRHAGE FOLLOWING INJURY
854	INTRACRANIAL INJURY OF OTHER AND UNSPECIFIED NATURE
860	TRAUMATIC PNEUMOTHORAX AND HEMOTHORAX
861	INJURY TO HEART AND LUNG
862	INJURY TO OTHER AND UNSPECIFIED INTRATHORACIC ORGANS
863	INJURY TO GASTROINTESTINAL TRACT
864	INJURY TO LIVER
865	INJURY TO SPLEEN
866	INJURY TO KIDNEY
867	INJURY TO PELVIC ORGANS
868	INJURY TO OTHER INTRA-ABDOMINAL ORGANS
869	INTERNAL INJURY TO UNSPECIFIED OR ILL-DEFINED ORGANS
870	OPEN WOUND OF OCULAR ADNEXA
871	OPEN WOUND OF EYEBALL
872	OPEN WOUND OF EAR
873	OTHER OPEN WOUND OF HEAD
874	OPEN WOUND OF NECK
875	OPEN WOUND OF CHEST (WALL)
876	OPEN WOUND OF BACK
877	OPEN WOUND OF BUTTOCK
878	OPEN WOUND OF GENITAL ORGANS (EXTERNAL), INC. TRAUMATIC AMPUTATION
879	OPEN WOUND OF OTHER AND UNSPECIFIED SITES, EXCEPT LIMBS
880	OPEN WOUND OF SHOULDER AND UPPER ARM
881	OPEN WOUND OF ELBOW, FOREARM, AND WRIST
882	OPEN WOUND OF HAND EXCEPT FINGER(S) ALONE
883	OPEN WOUND OF FINGER(S)
884	MULTIPLE AND UNSPECIFIED OPEN WOUND OF UPPER LIMB
885	TRAUMATIC AMPUTATION OF THUMB (COMPLETE) (PARTIAL)
886	TRAUMATIC AMPUTATION OF OTHER FINGER(S) (COMPLETE) (PARTIAL)
887	TRAUMATIC AMPUTATION OF ARM AND HAND (COMPLETE) (PARTIAL)
890	OPEN WOUND OF HIP AND THIGH
891	OPEN WOUND OF KNEE, LEG (EXCEPT THIGH), AND ANKLE
892	OPEN WOUND OF FOOT EXCEPT TOE(S) ALONE
893	OPEN WOUND OF TOE(S)
894	MULTIPLE AND UNSPECIFIED OPEN WOUND OF LOWER LIMB
895	TRAUMATIC AMPUTATION OF TOE(S) (COMPLETE) (PARTIAL)
896	TRAUMATIC AMPUTATION OF FOOT (COMPLETE) (PARTIAL)
897	TRAUMATIC AMPUTATION OF LEG(S) (COMPLETE) (PARTIAL)
900	INJURY TO BLOOD VESSELS OF HEAD AND NECK
901	INJURY TO BLOOD VESSELS OF THORAX

AXIS III- PHYSICAL DIAGNOSES (con't.)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
902	INJURY TO BLOOD VESSELS OF ABDOMEN AND PELVIS
903	INJURY TO BLOOD VESSELS OF UPPER EXTREMITY
904	INJURY TO BLOOD VESSELS OF LOWER EXTREMITY AND UNSPECIFIED SITES
905	LATE EFFECTS OF MUSCULOSKELETAL AND CONNECTIVE TISSUE INJURIES
906	LATE EFFECTS OF INJURIES TO SKIN AND SUBCUTANEOUS TISSUES
907	LATE EFFECTS OF INJURIES TO THE NERVOUS SYSTEM
908	LATE EFFECTS OF OTHER AND UNSPECIFIED INJURIES
909	LATE EFFECTS OF OTHER AND UNSPECIFIED EXTERNAL CAUSES
910	SUPERFICIAL INJURY OF FACE, NECK, AND SCALP EXCEPT EYE
911	SUPERFICIAL INJURY OF TRUNK
912	SUPERFICIAL INJURY OF SHOULDER AND UPPER ARM
913	SUPERFICIAL INJURY OF ELBOW, FOREARM, AND WRIST
914	SUPERFICIAL INJURY OF HAND(S) EXCEPT FINGER(S) ALONE
915	SUPERFICIAL INJURY OF FINGER(S)
916	SUPERFICIAL INJURY OF HIP, THIGH, LEG, AND ANKLE
917	SUPERFICIAL INJURY OF FOOT AND TOE(S)
918	SUPERFICIAL INJURY OF EYE AND ADNEXA
919	SUPERFICIAL INJURY OF OTHER, MULTIPLE, AND UNSPECIFIED SITES
920	CONTUSION OF FACE, SCALP, AND NECK EXCEPT EYE(S)
921	CONTUSION OF EYE AND ADNEXA
922	CONTUSION OF TRUNK
923	CONTUSION OF UPPER LIMB
924	CONTUSION OF LOWER LIMB AND OF OTHER AND UNSPECIFIED SITES
925	CRUSHING INJURY OF FACE, SCALP, AND NECK
926	CRUSHING INJURY OF TRUNK
927	CRUSHING INJURY OF UPPER LIMB
928	CRUSHING INJURY OF LOWER LIMB
929	CRUSHING INJURY OF MULTIPLE AND UNSPECIFIED SITES
930	FOREIGN BODY ON EXTERNAL EYE
931	FOREIGN BODY IN EAR
932	FOREIGN BODY IN NOSE
933	FOREIGN BODY IN PHARYNX AND LARYNX
934	FOREIGN BODY IN TRACHEA, BRONCHUS, AND LUNG
935	FOREIGN BODY IN MOUTH, ESOPHAGUS, AND STOMACH
936	FOREIGN BODY IN INTESTINE AND COLON
937	FOREIGN BODY IN ANUS AND RECTUM
938	FOREIGN BODY IN DIGESTIVE SYSTEM, UNSPECIFIED
939	FOREIGN BODY IN GENITOURINARY TRACT
940	BURN CONFINED TO EYE AND ADNEXA
941	BURN OF FACE, HEAD, AND NECK
942	BURN OF TRUNK
943	BURN OF UPPER LIMB, EXCEPT WRIST AND HAND
944	BURN OF WRIST(S) AND HAND(S)
945	BURN OF LOWER LIMB(S)
946	BURNS OF MULTIPLE SPECIFIED SITES
947	BURN OF INTERNAL ORGANS
948	BURNS CLASSIFIED ACCORDING TO EXTENT OF BODY SURFACE INVOLVED
949	BURN, UNSPECIFIED SITE
950	INJURY TO OPTIC NERVE AND PATHWAYS
951	INJURY TO OTHER CRANIAL NERVE(S)
952	SPINAL CORD INJURY WITHOUT EVIDENCE OF SPINAL BONE INJURY
953	INJURY TO NERVE ROOTS AND SPINAL PLEXUS

AXIS III- PHYSICAL DIAGNOSES (con't.)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
954	INJURY TO OTHER NERVE (S) OF TRUNK, EXCLUDING SHOULDER/PELVIC
955	INJURY TO PERIPHERAL NERVE (S) OF SHOULDER GIRDLE AND UPPER LIMB
956	INJURY TO PERIPHERAL NERVE (S) OF PELVIC GIRDLE AND LOWER LIMB
957	INJURY TO OTHER AND UNSPECIFIED NERVES
958	CERTAIN EARLY COMPLICATIONS OF TRAUMA
959	INJURY, OTHER AND UNSPECIFIED
960	POISONING BY ANTIBIOTICS
961	POISONING BY OTHER ANTI-INFECTIVES
962	POISONING BY HORMONES AND SYNTHETIC SUBSTITUTES
963	POISONING BY PRIMARILY SYSTEMIC AGENTS
964	POISONING BY AGENTS PRIMARILY AFFECTING BLOOD CONSTITUENTS
965	POISONING BY ANALGESICS, ANTIPYRETICS, AND ANTIRHEUMATICS
966	POISONING BY ANTICONVULSANTS AND ANTI-PARKINSONISM DRUGS
967	POISONING BY SEDATIVES AND HYPNOTICS
968	POISONING BY OTHER CENTRAL NERVOUS SYST. DEPRESSANTS/ANESTHETICS
969	POISONING BY PSYCHOTROPIC AGENTS
970	POISONING BY CENTRAL NERVOUS SYSTEM STIMULANTS
971	POISONING BY DRUGS AFFECTING THE AUTONOMIC NERVOUS SYSTEM
972	POISONING BY AGENTS PRIMARILY AFFECTING THE CARDIOVASCULAR SYSTEM
973	POISONING BY AGENTS PRIMARILY AFFECTING THE GASTROINTESTINAL SYST.
974	POISONING BY WATER, MINERAL, AND URIC ACID METABOLISM DRUGS
975	POISONING BY AGENTS PRIMARILY ON THE SMOOTH/SKELETAL MUSCLES
976	POISONING BY AGENTS PRIMARILY AFFECTING SKIN AND MUCOUS MEMBRANE, OPHTHALMOLOGICAL, OTORHINOLARYNGOLOGICAL, AND DENTAL DRUGS
977	POISONING BY OTHER AND UNSPECIFIED DRUGS AND MEDICINAL SUBSTANCES
978	POISONING BY BACTERIAL VACCINES
979	POISONING BY OTHER VACCINES AND BIOLOGICAL SUBSTANCES
980	TOXIC EFFECT OF ALCOHOL
981	TOXIC EFFECT OF PETROLEUM PRODUCTS
982	TOXIC EFFECT OF SOLVENTS OTHER THAN PETROLEUM-BASED
983	TOXIC EFFECT OF CORROSIVE AROMATICS, ACIDS, AND CAUSTIC ALKALIS
983	TOXIC EFFECT OF LEAD AND ITS COMPOUNDS (INCLUDING FUMES)
985	TOXIC EFFECT OF OTHER METALS
986	TOXIC EFFECT OF CARBON MONOXIDE
987	TOXIC EFFECT OF OTHER GASES, FUMES, OR VAPORS
988	TOXIC EFFECT OF NOXIOUS SUBSTANCES EATEN AS FOOD
989	TOXIC EFFECT OF OTHER SUBSTANCES, CHIEFLY NONMEDICINAL
990	EFFECTS OF RADIATION, UNSPECIFIED
991	EFFECTS OF REDUCED TEMPERATURE
992	EFFECTS OF HEAT AND LIGHT
993	EFFECTS OF AIR PRESSURE
994	EFFECTS OF OTHER EXTERNAL CAUSES
995	CERTAIN ADVERSE EFFECTS NOT ELSEWHERE CLASSIFIED
996	COMPLICATIONS PECULIAR TO CERTAIN SPECIFIED PROCEDURES
997	COMPLICATIONS AFFECTING SPECIFIED BODY SYSTEM
998	OTHER COMPLICATIONS OF PROCEDURES, NOT ELSEWHERE CLASSIFIED
999	COMPLICATIONS OF MEDICAL CARE, NOT ELSEWHERE CLASSIFIED
V01	CONTACT WITH OR EXPOSURE TO COMMUNICABLE DISEASES
V02	CARRIER OR SUSPECTED CARRIER OF INFECTIOUS DISEASES
V03	NEED FOR PROPHYLACTIC VACCINATION/INOCULATION-BACTERIAL DISEASES
V04	NEED FOR PROPHYLACTIC VACCINATION/INOCULATION AGAINST CERTAIN VIRAL DISEASES
V05	NEED FOR OTHER PROPHYLACTIC VACCINATION AND INOCULATION-SINGLE

AXIS III- PHYSICAL DIAGNOSES (con't.)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
V06	NEED FOR PROPHYLACTIC VACCINATION AND INOCULATION
V07	NEED FOR ISOLATION AND OTHER PROPHYLACTIC MEASURES
V08	ASYMPTOMATIC HUMAN IMMUNODEFICIENCY VIRUS (HIV) INFECTION STATUS
V09	INFECTION WITH DRUG-RESISTANT MICROORGANISMS
V10	PERSONAL HISTORY OF MALIGNANT NEOPLASM
V11	PERSONAL HISTORY OF MENTAL DISORDER
V12	PERSONAL HISTORY OF CERTAIN OTHER DISEASES
V13	PERSONAL HISTORY OF OTHER DISEASES
V14	PERSONAL HISTORY OF ALLERGY TO MEDICINAL AGENTS
V15	OTHER PERSONAL HISTORY PRESENTING HAZARDS TO HEALTH
V16	FAMILY HISTORY OF MALIGNANT NEOPLASM
V17	FAMILY HISTORY OF CERTAIN CHRONIC DISABLING DISEASES
V18	FAMILY HISTORY OF CERTAIN OTHER SPECIFIC CONDITIONS
V19	FAMILY HISTORY OF OTHER CONDITIONS
V20	HEALTH SUPERVISION OF INFANT OR CHILD
V21	CONSTITUTIONAL STATES IN DEVELOPMENT
V22	NORMAL PREGNANCY
V23	SUPERVISION OF HIGH-RISK PREGNANCY
V24	POSTPARTUM CARE AND EXAMINATION
V25	ENCOUNTER FOR CONTRACEPTIVE MANAGEMENT
V26	PROCREATIVE MANAGEMENT
V27	OUTCOME OF DELIVERY
V28	ANTENATAL SCREENING
V29	OBSERVATION/EVALUATION OF NEWBORNS FOR SUSPECTED CONDITIONS
V30	SINGLE LIVEBORN
V31	TWIN BIRTH, MATE LIVEBORN
V32	TWIN BIRTH, MATE STILLBORN
V33	TWIN BIRTH, UNSPECIFIED WHETHER MATE LIVEBORN OR STILLBORN
V34	OTHER MULTIPLE BIRTH (THREE OR MORE), MATES ALL LIVEBORN
V35	OTHER MULTIPLE BIRTH (THREE OR MORE), MATES ALL STILLBORN
V36	OTHER MULTIPLE BIRTH (THREE OR MORE), MATES LIVEBORN AND STILLBORN
V37	OTHER MULTIPLE BIRTH (THREE OR MORE), UNSPECIFIED WHETHER MATES LIVEBORN OR STILLBORN
V39	LIVEBORN, UNSPECIFIED WHETHER SINGLE, TWIN, OR MULTIPLE
V40	MENTAL AND BEHAVIORAL PROBLEMS
V41	PROBLEMS WITH SPECIAL SENSES AND OTHER SPECIAL FUNCTIONS
V42	ORGAN OR TISSUE REPLACED BY TRANSPLANT
V43	ORGAN OR TISSUE REPLACED BY OTHER MEANS
V44	ARTIFICIAL OPENING STATUS
V45	OTHER POSTSURGICAL STATES
V46	OTHER DEPENDENCE ON MACHINES
V47	OTHER PROBLEMS WITH INTERNAL ORGANS
V48	PROBLEMS WITH HEAD, NECK, AND TRUNK
V49	OTHER CONDITIONS INFLUENCING HEALTH STATUS
V50	ELECTIVE SURGERY FOR PURPOSES OTHER THAN REMEDYING HEALTH STATES
V51	AFTERCARE INVOLVING THE USE OF PLASTIC SURGERY
V52	FITTING AND ADJUSTMENT OF PROSTHETIC DEVICE AND IMPLANT
V53	FITTING AND ADJUSTMENT OF OTHER DEVICE
V54	OTHER ORTHOPEDIC AFTERCARE
V55	ATTENTION TO ARTIFICIAL OPENINGS
V56	ENCOUNTER FOR DIALYSIS AND DIALYSIS CATHETER CARE
V57	CARE INVOLVING USE OF REHABILITATION PROCEDURES
V58	ENCOUNTER FOR OTHER/UNSPECIFIED PROCEDURES AND AFTERCARE

AXIS III- PHYSICAL DIAGNOSES (con't.)

The codes are applicable to the Episode Screen

CODES	DESCRIPTION
V59	DONORS
V60	HOUSING, HOUSEHOLD, AND ECONOMIC CIRCUMSTANCES
V61	OTHER FAMILY CIRCUMSTANCES
V62	OTHER PSYCHOSOCIAL CIRCUMSTANCES
V63	UNAVAILABILITY OF OTHER MEDICAL FACILITIES FOR CARE
V64	PERSONS ENCOUNTERING HEALTH SERVICES FOR SPECIFIC PROCEDURES
V65	OTHER PERSONS SEEKING CONSULTATION WITHOUT COMPLAINT OR SICKNESS
V66	CONVALESCENCE AND PALLIATIVE CARE
V67	FOLLOW-UP EXAMINATION
V68	ENCOUNTERS FOR ADMINISTRATIVE PURPOSES
V69	PROBLEMS RELATED TO LIFESTYLE
V70	GENERAL MEDICAL EXAMINATION
V71	OBSERVATION AND EVALUATION FOR SUSPECTED CONDITIONS NOT FOUND
V72	SPECIAL INVESTIGATIONS AND EXAMINATIONS
V73	SPECIAL SCREENING EXAMINATION FOR VIRAL AND CHLAMYDIAL DISEASES
V74	SPECIAL SCREENING EXAMS FOR BACTERIAL AND SPIROCHETAL DISEASES
V75	SPECIAL SCREENING EXAMINATION FOR OTHER INFECTIOUS DISEASES
V76	SPECIAL SCREENING FOR MALIGNANT NEOPLASM
V77	SPECIAL SCREENING FOR ENDOCRINE, NUTRITIONAL, METABOLIC, AND IMMUNITY DISORDERS
V78	SPECIAL SCREENING FOR DISORDERS OF BLOOD/BLOOD-FORMING ORGANS
V79	SPECIAL SCREENING FOR MENTAL DISORDERS/DEVELOPMENTAL HANDICAPS
V80	SPECIAL SCREENING FOR NEUROLOGICAL, EYE, AND EAR DISEASES
V81	SPECIAL SCREENING FOR CARDIOVASCULAR, RESPIRATORY, AND GENITOURINARY DISEASES
V82	SPECIAL SCREENING FOR OTHER CONDITIONS

AXIS IV: PSYCHOSOCIAL AND ENVIRONMENTAL PROBLEMS

NOTE:

Report at admission, annually thereafter, and at formal discharge.

<u>Code</u>	<u>Description</u>
01	Problems with primary support group
02	Problems related to the social environment
03	Educational problems
04	Occupational problems
05	Housing problems
06	Economic problems
07	Problems with access to health care services
08	Problems related to interaction with the legal system/crime
09	Other psychosocial and environmental problems
00	Inadequate information

AXIS V (GAF) GLOBAL ASSESSMENT OF FUNCTIONING SCALE

Axis V permits the clinician to indicate his or her overall judgment of a person's psychological, social, and occupational functioning.

NOTE:

Report at admission, annually thereafter, and at formal discharge.

<u>Code</u>	<u>Description</u>
98-91	Superior functioning in a wide range of activities, life's problems never seem to get out of hand, is sought out by others because of his or her many positive qualities. No symptoms.
90-81	Absent or minimal symptoms (e.g., mild anxiety before an exam), good functioning in all areas, interested and involved in a wide range of activities, socially effective, generally satisfied with life, no more than everyday problems or concerns (e.g., an occasional argument with family members). GAF rating of 80 or above should seldom be used at admission.
80-71	If symptoms are present, they are transient and expectable reactions to psychosocial stressors (e.g., difficulty concentrating after family argument), no more than slight impairment in social, occupational, or school functioning (e.g., temporarily falling behind in school work).
70-61	Some mild symptoms (e.g., depressed mood and mild insomnia) or some difficulty in social, occupational, or school functioning (e.g., occasional truancy, or theft within the household), but generally functioning pretty well, has some meaningful interpersonal relationships.
60-51	Moderate symptoms (e.g., flat affect and circumstantial speech, occasional panic attacks) or moderate difficulty in social, occupational, or school functioning (e.g., few friends, conflicts with co-workers)
50-41	Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent shoplifting) or any serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).
40-31	Some impairment in reality testing or communication (e.g., speech is at times obscure, illogical or irrelevant) or major impairment in several areas, such as work or school, family relations, judgment, thinking or mood (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home, and is failing at school).

AXIS V (GAF) GLOBAL ASSESSMENT OF FUNCTIONING SCALE (con't.)

<u>Code</u>	<u>Description</u>
30-21	Behavior is considerably influenced by delusions or hallucinations or serious impairment in communication or judgment (e.g., sometimes incoherent, acts grossly inappropriate, suicidal preoccupation) or inability to function in almost all areas (e.g., stays in bed all day, no job, home, or friends).
20-11	Some danger of hurting self or others (e.g., suicide attempts without clear expectation of death, frequently violent, manic excitement) or occasionally fails to maintain minimal personal hygiene (e.g., smears feces) or gross impairment in communication (e.g., largely incoherent/mute).
10-1	Persistent danger of severely hurting self or others (e.g., recurrent violence) or persistent inability to maintain minimal personal hygiene or serious suicidal act with clear expectation of death.
0	Inadequate information.

CITIES* AND COMMUNITIES IN LOS ANGELES COUNTY

<u>City*/Community</u>	<u>City*/Community</u>	<u>City*/Community</u>
Acton	Calabasas	Eagle Rock
Agoura	Calabasas Park	East Los Angeles
Agoura Hills*	Canoga Park	Echo Park
Agua Dulce	Canyon Country	El Monte*
Alhambra*	Carson*	El Segundo*
Almondale	Castaic	El Sereno
Alpine	Caswell	Elizabeth Lake
Altadena	Century City	Elysian Park
Antelope Acres	Cerritos*	Encino
Arcadia*	Charter Oak	
Arleta	Chatsworth	Fairmont
Artesia*	City of Commerce*	Fernwood
Athens	City of Industry*	Florence
Atwater	Claremont*	Forrest Park
Avalon	Compton*	Fox Hills
Azusa*	Cornell	
	Covina*	
Baldwin Hills	Cudahy*	Gardena*
Baldwin Park*	Culver City*	Glassell Park
Bassett		Glendale*
Bell*	Del Sur	Glendora
Bellflower*	Del Valle	Glenview
Bell Gardens*	Denis	Gorham
Belmont Shore	Diamond Bar	Graham
Beverly Glen	Dominguez	Granada Hills
Beverly Hills*	Dominguez Hills	Green Valley
Big Pines	Downey*	
Bouquet Canyon	Duarte*	Hacienda Heights
Boyle Heights		Harbor City
Bradbury*		Hawaiian Gardens
Brentwood		Hawthorne*
Burbank*		

CITIES* AND COMMUNITIES IN LOS ANGELES COUNTY (con't.)

<u>City*/Community</u>	<u>City*/Community</u>	<u>City*/Community</u>
Hermosa Beach*	Malibu Estates	Pinetree
Hidden Hills*	Malibu	Vista Playa Del Rey
Hi Vista	Manhattan Beach*	Pomona*
Hollywood	Marina Del Rey	Portugese Bend
Huntington Park*	Mar Vista	
Hyde Park	Maywood	Quartz Hill
	Mint Canyon	
Industry*	Miraleste	Rancho Dominguez
Inglewood*	Mission Hills	Rancho Palos Verdes*
Irwindale*	Monrovia*	Ravena
	Montebello*	Redman
Kagel Canyon	Monte Nido	Redondo Beach*
	Monterey Park	Reseda
La Canada Flintridge*	Montrose	Rialto
La Crescenta	Mt Olympus	Rolling Hills*
La Habra	Mt Washington	Rolling Hills Estates*
La Habra Heights*	Mt Wilson	Roosevelt
La Mirada*		Rosemead
La Puente*	Neenach	Rowland Heights
Ladera Heights	Newhall	
Lake Hughes	North Hollywood	San Dimas*
Lake View Terrace	North Hills	San Fernando*
Lake Los Angeles	North Long Beach(h)	San Gabriel*
Lakewood*	Northridge	San Marino*
Lancaster*	Norwalk*	San Pedro
La Verne*		Santa Fe Springs*
Lawndale*	Oban	Santa Monica*
Lennox	Ocean Park	Santiago
Lincoln Heights	Olive View	Saugus
Little Rock	Pacific Palisades	Sawtelle
Llano	Pacoima	Sepulveda
Lomita*	Pallett	Sherman Oaks
Long Beach*	Palmdale*	Sierra Madre*
Long View	Palms	Signal Hill*
Los Angeles*	Palos Verdes Estates*	Silver Lake
Los Feliz	Panorama City	South El Monte*
Los Nietos	Paramount*	South Gate*
Lynwood*	Pasadena	South Pasadena*
	Pear Blossom	South San Gabriel

CITIES* AND COMMUNITIES IN LOS ANGELES COUNTY (con't.)

<u>City*/Community</u>	<u>City*/Community</u>	<u>City*/Community</u>
Malibu Lake	Pearland	Studio City
Malibu	Pico Rivera*	Sulphur Springs
Summit	Verdugo City	
Sunland	Vernon*	
Sun Valley	Viewpark	
Sylmar	Vincent	
Tarzana	Walnut*	
Temple City*	Westlake	
Terminal Island	Westlake Village*	
Toluca Lake	West Los Angeles*	
Topanga	Whittier*	
Torrance*	Willowbrook	
Tujunga	Wilmington	
	Windsor Hills	
Universal City	Winnetka	
	Woodland Hills	
Valencia		
Valinda		
Val Verde		
Valyermo		
Van Nuys		
Vasquez Rocks		
Venice		
Verdugo City		
Vernon*		
Viewpark		

COORDINATOR, SFPR

<u>Field</u>	<u>Description/Definition</u>
Case Manager I.D.	SFPR Case Manager I.D. Number. This is a seven digit staff identification number. For DMH/DHS providers, enter County Employee staff number; for contract providers, enter I.D. number generated by your agency. The number entered must be established in the Staff file.
Name: Last, First	Enter the SFPR case manager's last and first name. The Client Face Sheet states last or first name is "Not a data entry field," which means that, although you document the information on the Client Face Sheet, the data entry operator does not have to key in the information. Online, these fields are system generated from the case manager's staff code.
Area Code and Phone Number	Enter area code and phone number of the SFPR Case Manager.
Provider Number	Enter the four digit provider number of the SFPR case manager's work location.
Provider Name	Enter the provider name. The Client Face Sheet states provider name is "Not a data entry field," which means that, although you document the information on the Client Face Sheet, the data entry operator does not have to key in the information. Online, this field is system generated from the provider number.
Level	Enter the case management level of care being provided. Valid codes are I, II, or III.
Cycle Date	This field is system generated from the Coordination Plan Screen (CPS1)

CONSERVATORSHIP/COURT STATUS

Identifies whether or not the client has a conservatorship or juvenile court status.

NOTE:

Report at admission, annually thereafter, and at formal discharge.

Code **Description**

A Temporary Conservatorship (W&I Code, Section 5353)

 Permanent Conservatorship

Code **Description**

B Lanterman-Petris-Short (W&I Code, Section 5358)
C Murphy (W&I Code, Section 5008)
D Probate (Probate Code, Division 4, Section 1400)
E PC 2974 (Penal Code, Section 2974)
F Representative Payee Without Conservatorship (W&I Code, Section 5686)
G Juvenile Court, Dependent of the Court (W&I Code, Section 300)
H Juvenile Court, Ward – Status Offender (W&I Code, Section 601)
I Juvenile Court, Ward – Juvenile Offender (W&I Code, Section 602)
J Not Applicable
U Unknown, Not Reported

COUNTRY CODES

<u>Code</u>	<u>Country</u>
AA	= Aruba
AC	= Antigua and Barbuda
AF	= Afghanistan
AG	= Algeria
AJ	= Azerbaijan
AL	= Albania
AM	= Armenia
AN	= Andorra Islands
AO	= Angola
AQ	= American Samoa
AR	= Argentina
AS	= Australia
AT	= Ashmore and Cartier Islands
AU	= Austria
AV	= Anguilla
AY	= Antarctica
BA	= Bahrain
BB	= Barbados
BC	= Botswana
BD	= Bermuda
BE	= Belgium
BF	= The Bahamas
BG	= Bangladesh
BH	= Belize
BK	= Bosnia and Herzegovi
BL	= Bolivia
BM	= Burma
BN	= Benin
BO	= Belarus
BP	= Solomon Islands
BQ	= Navassa Island
BR	= Brazil
BS	= Bassas Da India
BT	= Bhutan
BU	= Bulgaria
BV	= Bouvet Island
BX	= Brunei
BY	= Burundi

COUNTRY CODES (con't.)

<u>Code</u>	<u>Country</u>
CA	= Canada
CB	= Cambodia
CD	= Chad
CE	= Sri Lanka
CF	= Congo
CG	= Zaire
CH	= China
CI	= Chile
CJ	= Cayman Islands
CK	= Cocos (Keeling) Islands
CM	= Cameroon
CN	= Comoros
CO	= Colombia
CQ	= Northern Mariana Islands
CR	= Coral Sea Islands
CS	= Costa Rica
CT	= Central African Republic
CU	= Cuba
CV	= Cape Verde
CW	= Cook Islands
CY	= Cyprus
DA	= Denmark
DJ	= Djibouti
DO	= Dominica
DQ	= Jarvis Island
DR	= Dominican Republic
EC	= Ecuador
EG	= Egypt
EI	= Ireland
EK	= Equatorial Guinea
EN	= Estonia
ER	= Eritrea
ES	= El Salvador
ET	= Ethiopia
EU	= Europa Island
EZ	= Czech Republic

COUNTRY CODES (con't.)

<u>Code</u>	<u>Country</u>
FG	= French Guiana
FI	= Finland
FJ	= Fiji
FK	= Falkland Islands (Islas Malvinas)
FM	= Federated States of Micronesia
FO	= Faroe Island
FP	= French Polynesia
FQ	= Baker Island
FR	= France
FS	= French Southern and Antarctic Lands
GA	= Gambia
GB	= Gabon
GG	= Georgia
GH	= Ghana
GI	= Gibraltar
GJ	= Grenada
GK	= Guernsey
GL	= Greenland
GM	= Germany
GO	= Glorioso Islands
GP	= Guadeloupe
GQ	= Guam
GR	= Greece
GT	= Guatemala
GV	= Guinea
GY	= Guyana
GZ	= Gaza Strip
HA	= Haiti
HK	= Hong Kong
HM	= Heard Island and McDonald Islands
HO	= Honduras
HQ	= Howland Island
HR	= Croatia
HU	= Hungary

COUNTRY CODES (con't.)

<u>Code</u>	<u>Country</u>
IC	= Iceland
ID	= Indonesia
IM	= Isle of Man
IN	= India
IO	= British Indian Ocean Territory
IP	= Clipperton Island
IR	= Iran
IS	= Israel
IT	= Italy
IV	= Cote D'Ivoire
IZ	= Iraq
JA	= Japan
JE	= Jersey
JM	= Jamaica
JN	= Jan Maye
JO	= Jordan
JQ	= Johnston Atoll
JU	= Juan De Nova Island
KE	= Kenya
KG	= Kyrgyzstan
KN	= Korea, Democratic People's Republic Of
KQ	= Kingman Reef
KR	= Kiribati
KS	= Korea, Republic of
KT	= Christmas Island
KU	= Kuwait
KZ	= Kazakhstan
LA	= Laos
LE	= Lebanon
LG	= Latvia
LH	= Lithuania
LI	= Liberia
LO	= Slovaki
LQ	= Palmyra Atoll
LS	= Liechtenstein
LT	= Lesotho
LU	= Luxembourg
LY	= Libya

COUNTRY CODES (con't.)

<u>Code</u>	<u>Country</u>
MA	= Madagascar
MB	= Martinique
MC	= Macau
MD	= Moldova
MF	= Mayotte
MG	= Mongolia
MH	= Montserrat
MI	= Malawi
MK	= Macedonia
ML	= Mali
MN	= Monaco
MO	= Morocco
MP	= Mauritius
MQ	= Midway Islands
MR	= Mauritania
MT	= Malta
MU	= Oman
MV	= Maldives
MW	= Montenegro
MX	= Mexico
MY	= Malaysia
MZ	= Mozambique
NC	= New Caledonia
NE	= Niue
NF	= Norfolk Island
NG	= Niger
NH	= Vanuatu
NI	= Nigeria
NL	= Netherlands
NO	= Norway
NP	= Nepal
NR	= Nauru
NS	= Suriname
NT	= Netherlands Antilles
NU	= Nicaragua
NZ	= New Zealand

COUNTRY CODES (con't.)

<u>Code</u>	<u>Country</u>
PA	= Paraguay
PC	= Pitcairn Islands
PE	= Peru
PF	= Paracel Islands
PG	= Spratly Islands
PK	= Pakistan
PL	= Poland
PM	= Panama
PO	= Portugal
PP	= Papua New Guinea
PS	= Palau
PU	= Guinea-Bissau
QA	= Qatar
RE	= Reunion
RM	= Marshall Islands
RO	= Romania
RP	= Philippines
RQ	= Puerto Rico
RS	= Russia
RW	= Rwanda
SA	= Saudi Arabia
SB	= St. Pierre and Miquelon
SC	= St. Kitts and Nevis
SE	= Seychelles
SF	= South Africa
SG	= Senegal
SH	= St. Helena
SL	= Sierra Leone
SM	= San Marino
SN	= Singapore
SO	= Somalia
SP	= Spain
SR	= Serbia
ST	= St. Lucia
SU	= Sudan
SV	= Svalbard
SW	= Sweden

COUNTRY CODES (con't.)

<u>Code</u>	<u>Country</u>
SX	= South Georgia and the South Sandwich Islands
SY	= Syria
SZ	= Switzerland
TC	= United Arab Emirates
TD	= Trinidad and Tobago
TE	= Tromelin Island
TH	= Thailand
TI	= Tajikistan
TK	= Turks and Caicos Islands
TL	= Tokelau
TN	= Tonga
TO	= Togo
TP	= Sao Tome and Principe
TS	= Tunisia
TU	= Turkey
TV	= Tuvalu
TW	= Taiwan
TX	= Turkmenistan
TZ	= Tanzania
UG	= Uganda
UK	= United Kingdom
UP	= Ukraine
US	= United States
UV	= Burkina
UY	= Uruguay
UZ	= Uzbekistan
VC	= St. Vicent and the Grnadines
VE	= Venezuela
VI	= British Virgin Islands
VM	= Vietnam
VQ	= Virgin Islands
VT	= Vatican City

COUNTRY CODES (con't.)

<u>Code</u>	<u>Country</u>
WA	= Namibia
WE	= West Bank
WF	= Wallis and Futuna
WI	= Western Sahara
WQ	= Wake Island
WS	= Western Samoa
WZ	= Swaziland
YM	= Yemen
ZA	= Zambia
ZI	= Zimbabwe

COUNTY CODES

<u>Code</u>	<u>County</u>	<u>Code</u>	<u>County</u>	<u>Code</u>	<u>County</u>
1	Alameda	21	Marin	41	San Mateo
2	Alpine	22	Mariposa	42	Santa Barbara
3	Amador	23	Mendocino	43	Santa Clara
4	Butte	24	Merced	44	Santa Cruz
5	Calaveras	25	Modoc		
				45	Shasta
6	Colusa	26	Mono	46	Sierra
7	Contra Costa	27	Monterey	47	Siskiyou
8	Del Norte	28	Napa	48	Solano
9	El Dorado	29	Nevada	49	Sonoma
10	Fresno	30	Orange		
				50	Stanislaus
11	Glenn	31	Placer	51	Sutter
12	Humboldt	32	Plumas	52	Tehama
13	Imperial	33	Riverside	53	Trinity
14	Inyo	34	Sacramento	54	Tulare
15	Kern	35	San Benito		
				55	Tuolumne
16	Kings	36	San Bernardino	56	Ventura
17	Lake	37	San Diego	57	Yolo
18	Lassen	38	San Francisco	58	Yuba
19	Los Angeles	39	San Joaquin		
20	Madera	40	San Luis Obispo		

<u>Code</u>	<u>County</u>	<u>Code</u>	<u>County</u>
60	Foreign Country	63	Sutter/Yuba
96	Unknown	65	Berkeley City
97	Transient (No formal residence)	66	Tri-City
98	Other State		

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING

NOS = Not Otherwise Specified

<u>Codes</u>	<u>Diagnoses</u>
995.81	Abuse of Adult (if focus of attention is on victim)
V62.3	Academic Problem
V62.4	Acculturation Problem
309.9	Adjustment Disorder Unspecified
309.28	Adjustment Disorder W/Anxiety and Depressed Mood
309.4	Adjustment Disorder W/Mixed Disturbance Emotion and Conduct
309.24	Adjustment Disorder with Anxiety
309.0	Adjustment Disorder with Depressed Mood
309.3	Adjustment Disorder with Disturbance of Conduct
V71.01	Adult Antisocial Behavior
995.2	Adverse Effects of Medication NOS
780.9	Age-Related Cognitive Decline
300.22	Agoraphobia Without History of Panic Disorder
305.00	Alcohol Abuse
291.0	Alcohol Intoxication/Alcohol Withdrawal Delirium
303.90	Alcohol Dependence
303.00	Alcohol Intoxication
291.9	Alcohol Related Disorder NOS
291.89	Alcohol Induced Anxiety, Mood, Sleep Disorders/Sexual Dysfunction

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
291.1	Alcohol-Induced Persisting Amnestic Disorder
291.2	Alcohol-Induced Persisting Dementia
291.3	Alcohol-Induced Psychotic Disorder With Hallucinations
291.5	Alcohol-Induced Psychotic Disorder, With Delusions
291.81	Alcohol Withdrawal
294.0	Amnestic Disorder Due to ... (Indicate Medical Condition)
294.8	Amnestic Disorder NOS/Dementia NOS
305.70	Amphetamine Abuse
304.40	Amphetamine Dependence
307.1	Anorexia Nervosa
301.7	Antisocial Personality Disorder
293.84	Anxiety Disorder Due to General Medical Condition
300.00	Anxiety Disorder NOS
314.01	Attention-Deficit/Hyperactivity Disorder, Combined Type or Hyperactive Impulse Type
314.9	Attention-Deficit/Hyperactivity Disorder NOS
314.00	Attention-Deficit/Hyperactivity Disorder, Predominantly Inattentive Type
299.00	Autistic Disorder
301.82	Avoidant Personality Disorder
V62.82	Bereavement
296.80	Bipolar Disorder NOS

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING (cont.)

<u>Codes</u>	<u>Diagnoses</u>
296.40	Bipolar I Disorder, MRE, Hypomanic/Manic, Unspecified
296.43	Bipolar I Disorder, MRE Manic, Severe W/O Psychotic Features
296.44	Bipolar I Disorder, MRE Manic, Severe With Psychotic Features
296.56	Bipolar I Disorder, MRE, Depressed, In Full Remission
296.55	Bipolar I Disorder, MRE, Depressed, In Partial Remission
296.51	Bipolar I Disorder, MRE, Depressed, Mild
296.52	Bipolar I Disorder, MRE, Depressed, Moderate
296.53	Bipolar I Disorder, MRE, Depressed, Severe W/O Psychotic Features
296.54	Bipolar I Disorder, MRE, Depressed, Severe With Psychotic Features
296.50	Bipolar I Disorder, MRE, Depressed, Unspecified
296.56	Bipolar I Disorder, MRE, Manic, In Full Remission
296.45	Bipolar I Disorder, MRE, Manic, In Partial Remission
296.41	Bipolar I Disorder, MRE, Manic, Mild
296.42	Bipolar I Disorder, MRE, Manic, Moderate
296.66	Bipolar I Disorder, MRE, Mixed, In Full Remission
296.65	Bipolar I Disorder, MRE, Mixed, In Partial Remission
296.61	Bipolar I Disorder, MRE, Mixed, Mild
296.62	Bipolar I Disorder, MRE, Mixed, Moderate
296.63	Bipolar I Disorder, MRE, Mixed, Severe W/O Psychotic Features
296.64	Bipolar I Disorder, MRE, Mixed, Severe With Psychotic Features

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
296.60	Bipolar I Disorder, MRE, Mixed, Unspecified
296.7	Bipolar I Disorder, MRE, Unspecified
296.01	Bipolar I Disorder, Single Manic Episode, Mild
296.02	Bipolar I Disorder, Single Manic Episode, Moderate
296.00	Bipolar I Disorder, Single Manic Episode, Unspecified
296.06	Bipolar I Disorder, SME, In Full Remission
296.05	Bipolar I Disorder, SME, In Partial Remission
296.03	Bipolar I Disorder, SME, Severe W/O Psychotic Features
296.04	Bipolar I Disorder, SME, Severe With Psychotic Features
296.89	Bipolar II Disorder
V62.89	Borderline Intellectual Functioning (for Axis II)
301.83	Borderline Personality Disorder
780.59	Breathing-Related Sleep Disorder/Sleep Disorder Mixed Type Due to/Sleep Disorder Parasomnia Type Due to (Indicate Medical Condition)
298.8	Brief Psychotic Disorder
307.51	Bulimia Nervosa
305.90	Caffeine Intoxication/Inhalant Abuse/Other (or unknown) Substance Abuse/Phencyclidine Abuse
305.20	Cannabis Abuse
304.30	Cannabis Dependence
293.89	Catatonic Disorder Due to a General Medical Condition

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
V71.02	Child or Adolescent Antisocial Behavior
299.10	Childhood Disintegrative Disorder
307.22	Chronic Motor or Vocal Tic Disorder
307.45	Circadian Rhythm Sleep Disorder
305.60	Cocaine Abuse
304.20	Cocaine Dependence
294.9	Cognitive Disorders NOS
307.9	Communication Disorder NOS
312.82	Conduct Disorder, Adolescent-Onset Type
312.81	Conduct Disorder, Childhood-Onset Type
312.89	Conduct Disorder, Unspecified Onset
300.11	Conversion Disorder
301.13	Cyclothymic Disorder
293.0	Delirium Due to ... (Indicate Medical Condition)
780.09	Delirium NOS
297.1	Delusional Disorder
290.10	Dementia Due to Creutzfeldt-Jakob/Pick's Disease
294.1	Dementia Due to Medical Disorder/HIV Disease
290.13	Dementia of Alzheimer's Depressed Mood early onset
290.21	Dementia of Alzheimer's Depressed Mood late onset

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
290.0	Dementia of Alzheimer's Uncomplicated late onset
290.11	Dementia of Alzheimer's W/Delirium early onset
290.12	Dementia of Alzheimer's W/Delusions early onset
290.3	Dementia of Alzheimer's W/Delirium late onset
290.20	Dementia of Alzheimer's W/Delusions late onset
301.6	Dependent Personality Disorder
300.6	Depersonalization Disorder
311	Depressive Disorder NOS
315.4	Developmental Coordination Disorder
799.9	Diagnosis Deferred (code invalid as Secondary/Axis II Diagnosis)
313.9	Disorder of Infancy, Childhood, or Adolescence NOS
315.2	Disorder of Written Expression
312.9	Disruptive Behavior Disorder NOS
300.12	Dissociative Amnesia
300.15	Dissociative Disorder NOS
300.13	Dissociative Fugue
300.14	Dissociative Identity Disorder
292.81	Drug Induced Delirium
292.89	Drug Induced Disorder NEC
292.84	Drug Induced Mood Disorder

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
292.83	Drug Induced Persisting Amnestic Disorder
292.82	Drug Induced Persisting Dementia
292.11	Drug Induced Psychotic Disorder, With Delusions
292.12	Drug Induced Psychotic Disorder, With Hallucinations
292.9	Drug Related Disorder NOS
292.0	Drug Withdrawal
302.76	Dyspareunia (Not Due to a Medical Condition)
307.47	Dyssomnia NOS/Nightmare Disorder/Parasomnia NOS
300.4	Dysthymic Disorder
307.50	Eating Disorder NOS
787.6	Encopresis W/Constipation and Overflow Incontinence
307.7	Encopresis, W/O Constipation and Overflow Incontinence
307.6	Enuresis (Not Due to a General Medical Condition)
302.4	Exhibitionism
315.31	Expressive Language Disorder
300.19	Factitious Disorder
300.16	Factitious Disorder W/Predominant Psychological Signs
307.59	Feeding Disorder of Infancy or Early Childhood
625.0	Female Dyspareunia Due to ... (Indicate Medical Condition)
302.73	Female Orgasmic Disorder

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
302.72	Female Sexual Desire Disorder/Male Erectile Disorder
625.8	Female Hypoactive Sexual Desire/Female Sexual Dysfunction Due to (Indicate Medical Condition)
302.81	Fetishism
302.89	Frotteurism
302.6	Gender Identity Disorder in Children/Gender Identity Disorder NOS
302.85	Gender Identity Disorder in Adolescents or Adults
300.02	Generalized Anxiety Disorder
305.30	Hallucinogen Abuse
304.50	Hallucinogen Dependence
301.50	Histrionic Personality Disorder
302.71	Hypoactive Sexual Desire Disorder
300.7	Hyposchondriasis/Body Dysmorphic Disorder
313.82	Identity Problem
312.30	Impulse-Control Disorder NOS
312.34	Intermittent Explosive Disorder
312.32	Kleptomania
315.31	Language Disorder
315.9	Learning Disorder NOS
296.33	Major Depressive Disorder, Recurrent, Severe W/O Psychotic Features

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
296.34	Major Depressive Disorder, Recurrent, Severe with Psychotic Features
296.36	Major Depressive Disorder, Recurrent, In Full Remission
296.35	Major Depressive Disorder, Recurrent, In Partial Remission
296.31	Major Depressive Disorder, Recurrent, Mild
296.32	Major Depressive Disorder, Recurrent, Moderate
296.30	Major Depressive Disorder, Recurrent, Unspecified
296.23	Major Depressive Disorder, SE, Severe W/O Psychotic Features
296.24	Major Depressive Disorder, SE, Severe With Psychotic Features
296.26	Major Depressive Disorder, Single Episode, In Full Remission
296.25	Major Depressive Disorder, Single Episode, In Partial Remission
296.21	Major Depressive Disorder, Single Episode, Mild
296.22	Major Depressive Disorder, Single Episode, Moderate
296.20	Major Depressive Disorder, Single Episode, Unspecified
607.84	Male Erectile Disorder Due to ... (Indicate Medical Condition)
302.74	Male Orgasmic Disorder
608.89	Male Dyspareunia/Male Hypoactive Sexual Desire/Male Sexual Dysfunction Due to.....(Indicate Medical Condition)
V65.2	Malingering
315.1	Mathematics Disorder
333.90	Medication-Induced Movement Disorder NOS

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
333.1	Medication-Induced Postural Tremor
293.9	Mental Disorder NOS Due to ... (Indicate Medical Condition)
317	Mild Mental Retardation
315.32	Mixed Receptive-Expressive Language Disorder
318.0	Moderate Mental Retardation
293.83	Mood Disorder Due to ... (Indicate Medical Condition)
296.90	Mood disorder NOS
301.81	Narcissistic Personality Disorder
347	Narcolepsy
995.52	Neglect of Child
V61.21	Neglect/Physical Abuse/Sexual Abuse of Child
333.92	Neuroleptic Malignant Syndrome
333.99	Neuroleptic-Induced Acute Akathisia
333.7	Neuroleptic-Induced Acute Dystonia
332.1	Neuroleptic-Induced Parkinsonism
333.82	Neuroleptic-Induced Tardive Dyskinesia
305.10	Nicotine Dependence
V71.09	No Diagnosis/No Mental Disorder (code invalid as Secondary/Axis III Diagnosis)
V15.81	Noncompliance With Treatment
300.3	Obsessive-Compulsive Disorder

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
301.4	Obsessive-Compulsive Personality Disorder
V62.2	Occupational Problem
305.50	Opioid Abuse
304.0	Opioid Dependence
313.81	Oppositional Defiant Disorder
304.90	Other (or unknown) Substance Dependence
307.89	Pain Disorder Associated W/Psychological and Medical
307.80	Pain Disorder Associated With Psychological Factors
300.21	Panic Disorder With Agoraphobia
300.01	Panic Disorder Without Agoraphobia
301.0	Paranoid Personality Disorder
302.9	Paraphilia NOS/Sexual Disorder NOS
V61.20	Parent-Child Relational Problem
312.31	Pathological Gambling
302.2	Pedophilia
310.1	Personality Change Due to General Medical Condition
301.9	Personality Disorder NOS
299.80	Pervasive Developmental Disorder NOS/Asperger's Disorder/Rett's Disorder
304.60	Phencyclidine Dependent and Inhalant Dependence
315.39	Phonological Disorder

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
995.81	Physical Abuse of Adult (focus on victim)
995.54	Physical Abuse of Child (focus on victim)
V62.83	Physical/Sexual Abuse of Adult (by non-partner)
V61.12	Physical/Sexual Abuse of Adult (by partner) (code invalid as of 1/1/97)
307.52	Pica
304.80	Polysubstance Dependence
309.81	Post-Traumatic Stress Disorder
302.75	Premature Ejaculation
307.44	Primary Hypersomnia/Hypersomnia related to (Axis I/II Disorder)
307.42	Primary Insomnia/Insomnia Related to (Axis I/II Disorder)
318.2	Profound Mental Retardation
293.81	Psychotic Disorder Due to ... (Indicate Medical Condition) Delusions
293.82	Psychotic Disorder Due to ... (Indicate Medical Condition) With Hallucinations
298.9	Psychotic Disorder NOS
312.33	Pyromania
313.89	Reactive Attachment Disorder of Infancy or Early Childhood
315.00	Reading Disorder
V62.81	Relational Problem NOS
V61.9	Relational Problem Related to a Mental Disorder or General Medical Condition
V62.89	Religious or Spiritual Problem/Phase of Life Problem (for Axis I)

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
307.53	Rumination Disorder
295.70	Schizoaffective Disorder
301.20	Schizoid Personality Disorder
295.20	Schizophrenia, Catatonic Type
295.10	Schizophrenia, Disorganized Type
295.30	Schizophrenia, Paranoid Type
295.60	Schizophrenia, Residual Type
295.90	Schizophrenia, Undifferentiated Type
295.40	Schizophreniform Disorder
301.22	Schizotypal Personality Disorder
305.40	Sedative, Hypnotic, or Anxiolytic Abuse
304.10	Sedative, Hypnotic, or Anxiolytic Dependence
313.23	Selective Mutism
309.21	Separation Anxiety Disorder
318.1	Severe Mental Retardation
995.83	Sexual Abuse of Adult (focus on victim)
V61.12	Sexual Abuse of Adult (by partner)
995.53	Sexual Abuse of Child (focus on victim)
302.79	Sexual Aversion Disorder
302.70	Sexual Dysfunction NOS
302.83	Sexual Masochism
302.84	Sexual Sadism

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
297.3	Shared Psychotic Disorder
307.46	Sleep Terror Disorder/ Sleepwalking Disorder
780.54	Sleep Disorder Due to ... (Indicate Medical Condition), Hypersomnia Type
780.52	Sleep Disorder Due to ... (Indicate Medical Condition), Insomnia Type
300.23	Social Phobia
300.81	Somatization Disorder
300.82	Somatoform Disorder NOS and Undifferentiated Somatoform Disorder
300.29	Specific Phobia
316	(Specified Psychological Factor) Affecting (Indicate Medical Condition)
307.3	Stereotypic Movement Disorder
307.0	Stuttering
307.20	Tic Disorder NOS
307.23	Tourette's Disorder
307.21	Transient Tic Disorder
302.3	Transvestic Fetishism
312.39	Trichotillomania
300.9	Unspecified Mental Disorder (Non-psychotic)
319	Unspecified Mental Retardation
306.51	Vagismus (Not Due to a General Medical Condition)
290.40	Vascular Dementia, Uncomplicated

DSM IV DIAGNOSES CODES - ALPHABETICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
290.41	Vascular Dementia, With Delirium
290.42	Vascular Dementia, With Delusions
290.43	Vascular Dementia, With Depressed Mood
302.82	Voyeurism

DSM IV DIAGNOSES CODES - NUMERICAL LISTING

NOS = Not Otherwise Specified

<u>Codes</u>	<u>Diagnoses</u>
290.0	Dementia of Alzheimer's Uncomplicated late onset
290.10	Dementia due to Creutzfeldt-Jakob/Pick's Disease
290.11	Dementia of Alzheimer's W/Delirium early onset
290.12	Dementia of Alzheimer's W/Delusions early onset
290.13	Dementia of Alzheimer's Depressed Mood early onset
290.20	Dementia of Alzheimer's W/Delusions late onset
290.21	Dementia of Alzheimer's Depressed Mood late onset
290.3	Dementia of Alzheimer's W/Delirium late onset
290.40	Vascular Dementia, Uncomplicated
290.41	Vascular Dementia, With Delirium
290.42	Vascular Dementia, With Delusions
290.43	Vascular Dementia, With Depressed Mood
291.0	Alcohol Intoxication/Alcohol Withdrawal Delirium
291.1	Alcohol-Induced Persisting Amnestic Disorder
291.2	Alcohol-Induced Persisting Dementia
291.3	Alcohol-Induced Psychotic Disorder, With Hallucinations
291.5	Alcohol-Induced Psychotic Disorder, With Delusions
291.81	Alcohol Withdrawal
291.89	Alcohol-Induced Anxiety, Mood, Sleep Disorders/Sexual Dysfunction

DSM IV DIAGNOSES CODES - NUMERICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
291.9	Alcohol Related Disorder NOS
292.0	Drug Withdrawal
292.11	Drug Induced Psychotic Disorder, With Delusions
292.12	Drug Induced Psychotic Disorder, With Hallucinations
292.81	Drug Induced Delirium
292.82	Drug Induced Persisting Dementia
292.83	Drug Induced Persisting Amnestic Disorder
292.84	Drug Induced Mood Disorder
292.89	Drug Induced Disorder NEC
292.9	Drug Related Disorder NOS
293.0	Delirium Due to ... (Indicate Medical Condition)
293.81	Psychotic Disorder Due to ... (Indicate Medical Condition) Delusions
293.82	Psychotic Disorder Due to ... (Indicate Medical Condition) With Hallucinations
293.83	Mood Disorder Due to ... (Indicate Medical Condition)
293.84	Anxiety Disorder Due to General Medical Condition
293.89	Catatonic Disorder Due to General Medical Condition
293.9	Mental Disorder NOS Due to ... (Indicate Medical Condition)
294.0	Amnestic Disorder Due to ... (Indicate Medical Condition)
294.1	Dementia Due to Medical Disorder/HIV Disease
294.8	Amnestic Disorder NOS/Dementia NOS

DSM IV DIAGNOSES CODES - NUMERICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
294.9	Cognitive Disorders NOS
295.10	Schizophrenia, Disorganized Type
295.20	Schizophrenia, Catatonic Type
295.30	Schizophrenia, Paranoid Type
295.40	Schizophreniform Disorder
295.60	Schizophrenia, Residual Type
295.70	Schizoaffective Disorder
295.90	Schizophrenia, Undifferentiated Type
296.00	Bipolar I Disorder, Single Manic Episode, Unspecified
296.01	Bipolar I Disorder, Single Manic Episode, Mild
296.02	Bipolar I Disorder, Single Manic Episode, Moderate
296.03	Bipolar I Disorder, SME, Severe W/O Psychotic Features
296.04	Bipolar I Disorder, SME, Severe With Psychotic Features
296.05	Bipolar I Disorder, SME, In Partial Remission
296.06	Bipolar I Disorder, SME, In Full Remission
296.20	Major Depressive Disorder, Single Episode, Unspecified
296.21	Major Depressive Disorder, Single Episode, Mild
296.22	Major Depressive Disorder, Single Episode, Moderate
296.23	Major Depressive Disorder, SE, Severe W/O Psychotic Features
296.24	Major Depressive Disorder, SE, Severe With Psychotic Features

DSM IV DIAGNOSES CODES - NUMERICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
296.25	Major Depressive Disorder, Single Episode, In Partial Remission
296.26	Major Depressive Disorder, Single Episode, In Full Remission
296.30	Major Depressive Disorder, Recurrent, Unspecified
296.31	Major Depressive Disorder, Recurrent, Mild
296.32	Major Depressive Disorder, Recurrent, Moderate
296.33	Major Depressive Disorder, Rec, Severe W/O Psychotic Features
296.34	Major Depressive Disorder, Rec, Severe With Psychotic Features
296.35	Major Depressive Disorder, Recurrent, In Partial Remission
296.36	Major Depressive Disorder, Recurrent, In Full Remission
296.40	Bipolar I Disorder, MRE, Hypomanic/Manic, Unspecified
296.41	Bipolar I Disorder, MRE, Manic, Mild
296.42	Bipolar I Disorder, MRE, Manic, Moderate
296.43	Bipolar I Disorder, MRE Manic, Severe W/O Psychotic Features
296.44	Bipolar I Disorder, MRE Manic, Severe With Psychotic Features
296.45	Bipolar I Disorder, MRE, Manic, In Partial Remission
296.46	Bipolar I Disorder, MRE, Manic, In Full Remission
296.50	Bipolar I Disorder, MRE, Depressed, Unspecified
296.51	Bipolar I Disorder, MRE, Depressed, Mild
296.52	Bipolar I Disorder, MRE, Depressed, Moderate
296.53	Bipolar I Disorder, MRE, Depressed, Severe W/O Psychotic Features

DSM IV DIAGNOSES CODES - NUMERICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
296.54	Bipolar I Disorder, MRE, Depressed, Severe With Psychotic Features
296.55	Bipolar I Disorder, MRE, Depressed, In Partial Remission
296.56	Bipolar I Disorder, MRE, Depressed, In Full Remission
296.60	Bipolar I Disorder, MRE, Mixed, Unspecified
296.61	Bipolar I Disorder, MRE, Mixed, Mild
296.62	Bipolar I Disorder, MRE, Mixed, Moderate
296.63	Bipolar I Disorder, MRE, Mixed, Severe W/O Psychotic Features
296.64	Bipolar I Disorder, MRE, Mixed, Severe With Psychotic Features
296.65	Bipolar I Disorder, MRE, Mixed, In Partial Remission
296.66	Bipolar I Disorder, MRE, Mixed, In Full Remission
296.7	Bipolar I Disorder, MRE, Unspecified
296.80	Bipolar Disorder NOS
296.89	Bipolar II Disorder
296.90	Mood Disorder NOS
297.1	Delusional Disorder
297.3	Shared Psychotic Disorder
298.8	Brief Psychotic Disorder
298.9	Psychotic Disorder NOS
299.0	Autistic Disorder
299.10	Childhood Disintegrative Disorder

DSM IV DIAGNOSES CODES - NUMERICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
299.80	Pervasive Developmental Disorder NOS/Asperger's Disorder/Rett's Disorder
300.00	Anxiety Disorder NOS
300.01	Panic Disorder Without Agoraphobia
300.02	Generalized Anxiety Disorder
300.11	Conversion Disorder
300.12	Dissociative Amnesia
300.13	Dissociative Fugue
300.14	Dissociative Identity Disorder
300.15	Dissociative Disorder NOS
300.16	Factitious Disorder W/Predominant Psychological Signs
300.19	Factitious Disorder
300.21	Panic Disorder With Agoraphobia
300.22	Agoraphobia Without History of Panic Disorder
300.23	Social Phobia
300.29	Specific Phobia
300.3	Obsessive-Compulsive Disorder
300.4	Dysthymic Disorder
300.6	Depersonalization Disorder
300.7	Hypochondriasis/Body Dysmorphic Disorder
300.81	Somatization Disorder

DSM IV DIAGNOSES CODES - NUMERICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
300.82	Somatoform Disorder NOS and Undifferentiated Somatoform Disorder
300.9	Unspecified Mental Disorder (Non-psychotic)
301.0	Paranoid Personality Disorder
301.13	Cyclothymic Disorder
301.20	Schizoid Personality Disorder
301.22	Schizotypal Personality Disorder
301.4	Obsessive-Compulsive Personality Disorder
301.50	Histrionic Personality Disorder
301.6	Dependent Personality Disorder
301.7	Antisocial Personality Disorder
301.81	Narcissistic Personality Disorder
301.82	Avoidant Personality Disorder
301.83	Borderline Personality Disorder
301.9	Personality Disorder NOS
302.2	Pedophilia
302.3	Transvestic Fetishism
302.4	Exhibitionism
302.6	Gender Identity Disorder in Children/Gender Identity Disorder NOS
302.70	Sexual Dysfunction NOS
302.71	Hypoactive Sexual Desire Disorder

DSM IV DIAGNOSES CODES - NUMERICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
302.72	Female Sexual Desire Disorder/Male Erectile Disorder
302.73	Female Orgasmic Disorder
302.74	Male Orgasmic Disorder
302.75	Premature Ejaculation
302.76	Dyspareunia (Not Due to a Medical Condition)
302.79	Sexual Aversion Disorder
302.81	Fetishism
302.82	Voyeurism
302.83	Sexual Masochism
302.84	Sexual Sadism
302.85	Gender Identity Disorder in Adolescents or Adults
302.89	Frotteurism
302.9	Paraphilia NOS/Sexual Disorder NOS
303.00	Alcohol Intoxication
303.90	Alcohol Dependence
304.00	Opioid Dependence
304.10	Sedative, Hypnotic, or Anxiolytic Dependence
304.20	Cocaine Dependence
304.30	Cannabis Dependence
304.40	Amphetamine Dependence

DSM IV DIAGNOSES CODES - NUMERICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
304.50	Hallucinogen Dependence
304.60	Phencyclidine Dependence and Inhalant Dependence
304.80	Poly-substance Dependence
304.90	Other (or unknown) Substance Dependence
305.00	Alcohol Abuse
305.10	Nicotine Dependence
305.20	Cannabis Abuse
305.30	Hallucinogen Abuse
305.40	Sedative, Hypnotic, or Anxiolytic Abuse
305.50	Opioid Abuse
305.60	Cocaine Abuse
305.70	Amphetamine Abuse
305.90	Caffeine Intoxication/Inhalant Abuse/Other (or unknown) Substance Abuse/Phencyclidine Abuse
306.51	Vaginismus (Not Due to a General Medical Condition)
307.0	Stuttering
307.1	Anorexia Nervosa
307.20	Tic Disorder NOS
307.21	Transient Tic Disorder
307.22	Chronic Motor or Vocal Tic Disorder

DSM IV DIAGNOSES CODES - NUMERICAL LISTING (con't)

<u>Codes</u>	<u>Diagnoses</u>
307.23	Tourette's Disorder
307.3	Stereotypic Movement Disorder
307.42	Primary Insomnia/Insomnia Related to (Axis I/II Disorder)
307.44	Primary Hypersomnia/Hypersomnia related to (Axis I/II Disorder)
307.45	Circadian Rhythm Sleep Disorder
307.46	Sleep Terror Disorder/ Sleepwalking Disorder
307.47	Dyssomnia NOS/Nightmare Disorder/Parasomnia NOS
307.50	Eating Disorder NOS
307.51	Bulimia Nervosa
307.52	Pica
307.53	Rumination Disorder
307.59	Feeding Disorder of Infancy or Early Childhood
307.6	Enuresis (Not Due to a General Medical Condition)
307.7	Encopresis, W/O Constipation and Overflow Incontinence
307.80	Pain Disorder Associated With Psychological Factors
307.89	Pain Disorder Associated W/Psychological and Medical
307.9	Communication Disorder NOS
308.3	Acute Stress Disorder
309.0	Adjustment Disorder With Depressed Mood
309.21	Separation Anxiety Disorder

DSM IV DIAGNOSES CODES - NUMERICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
309.24	Adjustment Disorder With Anxiety
309.28	Adjustment Disorder W/Anxiety and Depressed Mood
309.3	Adjustment Disorder With Disturbance of Conduct
309.4	Adjustment Disorder W/Mixed Disturbance Emotion & Conduct
309.81	Post-Traumatic Stress Disorder
309.9	Adjustment Disorder Unspecified
310.1	Personality Change Due to General Med Condition
311	Depressive Disorder NOS
312.30	Impulse-Control Disorder NOS
312.31	Pathological Gambling
312.32	Kleptomania
312.33	Pyromania
312.34	Intermittent Explosive Disorder
312.39	Trichotillomania
312.81	Conduct Disorder, Childhood-Onset Type
312.82	Conduct Disorder, Adolescent-Onset Type
312.89	Conduct Disorder, Unspecified Onset
312.9	Disruptive Behavior Disorder NOS
313.23	Selective Mutism
313.81	Oppositional Defiant Disorder

DSM IV DIAGNOSES CODES - NUMERICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
313.82	Identity Problem
313.89	Reactive Attachment Disorder of Infancy or Early Childhood
313.9	Disorder of Infancy, Childhood, or Adolescence NOS
314.00	Attention-Deficit/Hyperactivity Disorder, Predominantly Inattentive Type
314.01	Attention-Deficit/Hyperactivity Disorder, Combined Type or Hyperactive Impulse Type
314.9	Attention-Deficit/Hyperactivity Disorder NOS
315.00	Reading Disorder
315.1	Mathematics Disorder
315.2	Disorder of Written Expression
315.31	Expressive Language Disorder
315.32	Mixed Receptive-Expressive Language Disorder
315.39	Phonological Disorder
315.4	Developmental Coordination disorder
315.9	Learning Disorder NOS
316	(Specified Psychological Factor) Affecting (Indicate Medical Condition)
317	Mild Mental Retardation
318.0	Moderate Mental Retardation
318.1	Severe Mental Retardation
318.2	Profound Mental Retardation
319	Unspecified Mental Retardation

DSM IV DIAGNOSES CODES - NUMERICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
332.1	Neuroleptic-Induced Parkinsonism
333.1	Medication-Induced Postural Tremor
333.7	Narcoleptic-Induced Acute Dystonia
333.82	Narcoleptic-Induced Tardive Dyskinesia
333.90	Medication-Induced Movement Disorder NOS
333.92	Narcoleptic Malignant Syndrome
333.99	Neuroleptic-Induced Acute Akathisia
347	Narcolepsy
607.84	Male Erectile Disorder Due to ... (Indicate Medical Condition)
608.89	Male Dyspareunia/Male Hypoactive Sexual Desire/Male Sexual Dysfunction Due to....(Indicate Medical Condition)
625.0	Female Dyspareunia Due to ... (Indicate Medical Condition)
625.8	Female Hypoactive Sexual Desire/Female Sexual Dysfunction Due to (Indicate Medical Condition)
780.09	Delirium NOS
780.52	Sleep Disorder Due to ... (Indicate Medical Condition), Insomnia Type
780.54	Sleep Disorder Due to ... (Indicate Medical Condition), Hypersomnia Type
780.59	Breathing-Related Sleep Disorder/Sleep Disorder Mixed Type Due to/Sleep Disorder Parasomnia Type Due to (Indicate Medical Condition)
780.9	Age-Related Cognitive Decline
787.6	Encopresis W/Constipation and Overflow Incontinence
799.9	Diagnosis Deferred (code invalid as Secondary/Axis II Diagnosis)

DSM IV DIAGNOSES CODES - NUMERICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
995.5	Abuse of Child (if focus of attention is on victim) (code invalid as of 12/31/96)
995.52	Neglect of Child (focus on victim)
995.53	Sexual Abuse of Child (focus on Victim)
995.54	Physical Abuse of Child (focus on victim)
995.81	Physical Abuse of Adult (focus on victim)
995.83	Sexual Abuse of Adult (focus on victim)
V15.81	Noncompliance With Treatment
V61.1	Partner Relational Problems (code invalid as of 12/31/96)
V61.10	Partner Relations Problems
V61.12	Physical/Sexual Abuse of Adult (by partner)
V61.20	Parent-Child Relational Problem
V61.21	Neglect/Physical Abuse/Sexual Abuse of Child
V61.8	Sibling Relational Problem
V61.9	Relational Problem Related to a Mental Disorder or General Medical Condition
V62.2	Occupational Problem
V62.3	Academic Problem
V62.4	Acculturation Problem
V62.81	Relational Problem NOS
V62.82	Bereavement

DSM IV DIAGNOSES CODES - NUMERICAL LISTING (con't.)

<u>Codes</u>	<u>Diagnoses</u>
V62.83	Physical or Sexual Abuse of Adult (by non-partner)
V62.89	Religious or Spiritual Problem/Phase of Life Problem (for Axis I)
V62.89	Borderline Intellectual Functioning (for Axis II)
V65.2	Malingering
V71.01	Adult Antisocial Behavior
V71.02	Child or Adolescent Antisocial Behavior
V71.09	No Diagnosis (code invalid as Secondary/Axis III Diagnosis)

DUAL DIAGNOSES CODES FOR SUBSTANCE ABUSE

NOTE:

Report at admission, annually thereafter, and at discharge.

<u>“DUAL” Codes</u>		<u>Dual Diagnosis Description</u>	<u>DSM IV Codes Reference</u>	
30xAL	30uAL	Alcohol	303.00	Alcohol Intoxification
			303.90	Alcohol Dependence (Includes remission)
			305.0	Alcohol Abuse
30xAM	30uAM	Amphetamine	292.89	Amphetamine or other similarly acting Sympathomimetic intoxication or
			305.70	Abuse or
			304.40	Dependence (includes remission)
30xMJ	30uMJ	Cannabis	292.89	Cannabis (Marijuana or Hashish)
				Intoxication Or
			305.20	Abuse or
			304.30	Independence (includes remission)
30xCO	30uCO	Cocaine	292.89	Cocaine Intoxication
			305.60	Cocaine Abuse
			304.20	Cocaine Dependence (includes remission)
30xHA	30uHA	Hallucinogen	292.89	Hallucinogen, Phencyclidine (PCP) or Similarly acting Arcyclohexylamine
				Intoxication or
			305.30	Abuse or
			304.50	Dependence (includes remission)
30xIN	30uIN	Inhalants	292.89	Inhalant Intoxication or
			305.90	Abuse or
			304.60	Dependence (includes remission)
30xSO	30uSO	Sedatives	292.89	Sedative, Hypnotic or Anxiolytic Intoxication Opioids Or

DUAL DIAGNOSES CODES FOR SUBSTANCE ABUSE (con't)

<u>“DUAL” Codes</u>		<u>Dual Diagnosis Description</u>	<u>DSM IV Codes Reference</u>
			305.40 Abuse or 304.10 Dependence (includes remission) 292.89 Opioid Intoxication or 305.50 Abuse or 304.00 Dependence (includes remission)
30xPS	30uPS	Poly-substance Use	304.80 Poly-substance Dependence (includes remission)
30xNO		No use of or history of psychoactive substances that interferes with the mental disorder and adaptive functioning.	
99999		Unknown	

NOTE:

X Codes: The Dual Diagnosis codes under (x) are to be used for clients who meet the DSM IV criteria for psychoactive substance intoxication, abuse, and dependence (includes remission).

U Codes: The Dual Diagnosis codes under (u) are to be used to report clients with psychoactive substance use which interferes with their mental disorder and adaptive functioning.

EDUCATIONAL LEVEL - HIGHEST GRADE COMPLETED

NOTE:

Report at admission, annually thereafter, and at formal discharge.

<u>Code</u>	<u>Educational Level</u>
01	First grade
02	Second grade
03	Third grade
04	Fourth grade
05	Fifth grade
06	Sixth grade
07	Seventh grade
08	Eighth grade
09	Ninth grade
10	Tenth grade
11	Eleventh grade
12	Twelfth grade
13	Freshman college level
14	Sophomore college level (No degree)
15	Junior college level (No degree)
16	Senior college level (No degree)
17	Associate of Arts degree
18	Bachelor of Arts degree
19	Master's degree
20	Doctorate degree
21	Completed vocational training with high school diploma
22	Completed vocational training without high school diploma
98	None
99	Unknown

EMPLOYMENT STATUS CODES

NOTE:

Report at admission, annually thereafter, and at formal discharge.

<u>Code</u>	<u>Employment Status</u>
FC	Full-time competitive employment (salaried)
PC	Part-time competitive employment (salaried)
FN	Full-time noncompetitive employment (sheltered workshop)
PN	Part-time noncompetitive employment (sheltered workshop)
CW	CalWORKS (Welfare to Work)
GW	GROW (General Relief Opportunity For Work (Welfare to Work)
HM	Homemaker
ST	Student
UE	Unemployed
RT	Retired
OT	Other
UN	Unknown

ETHNICITY CODES

<u>Code</u>	<u>Ethnicity Description</u>																																				
01	White																																				
02	Black																																				
03	Hispanic – Indicate ethnic background or region of origin: <ul style="list-style-type: none">• Mexico• Central America• South America• Cuba• Puerto Rico• Other																																				
04	American Indian or Alaska Native - Specify tribe from the list below: <table><tr><td>Assiniboine</td><td>Hoopa</td><td>Mono</td><td>Sioux</td></tr><tr><td>Apache</td><td>Juaneno</td><td>Navajo</td><td>Smith River</td></tr><tr><td>Blackfeet</td><td>Kumeyaay</td><td>Paiute</td><td>Tohono O’Odham</td></tr><tr><td>Cahuilla</td><td>Karuk</td><td>Pima</td><td>Tolowa</td></tr><tr><td>Cherokee</td><td>Luiseno</td><td>Pit River</td><td>Wintun</td></tr><tr><td>Choctaw</td><td>Maidu</td><td>Pomo</td><td>Yaqui</td></tr><tr><td>Chumash</td><td>MeWuk</td><td>Pueblo</td><td>Yokut</td></tr><tr><td>Dieguneno</td><td>Mission</td><td>Serreno</td><td>Yurok</td></tr><tr><td>Gabrieleno</td><td>Modoc</td><td>Shasta</td><td>Other</td></tr></table>	Assiniboine	Hoopa	Mono	Sioux	Apache	Juaneno	Navajo	Smith River	Blackfeet	Kumeyaay	Paiute	Tohono O’Odham	Cahuilla	Karuk	Pima	Tolowa	Cherokee	Luiseno	Pit River	Wintun	Choctaw	Maidu	Pomo	Yaqui	Chumash	MeWuk	Pueblo	Yokut	Dieguneno	Mission	Serreno	Yurok	Gabrieleno	Modoc	Shasta	Other
Assiniboine	Hoopa	Mono	Sioux																																		
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Chumash	MeWuk	Pueblo	Yokut																																		
Dieguneno	Mission	Serreno	Yurok																																		
Gabrieleno	Modoc	Shasta	Other																																		
05	Chinese																																				
06	Japanese																																				
07	Filipino																																				
09	Other Non-White (e.g. Arabs, Iraqi, Turks)																																				
10	Korean																																				
11	Indochinese																																				
12	Amerasian																																				
13	Cambodian																																				
14	Samoan																																				
15	Asian Indian																																				
16	Hawaiian Native																																				
17	Guamanian																																				
18	Laotian																																				
19	Vietnamese																																				
20	Other Black																																				
21	Other White																																				
26	Other																																				
27	Hmong																																				
28	Mien																																				
29	Other Asian																																				
30	Other Pacific Islander																																				
99	Unknown/Not Reported																																				

EVIDENCE-BASED PRACTICES / SERVICE STRATEGIES/PEI SERVICES

*Option 1, Option 2 and Option 3 codes cannot be used for the same service. Only codes from the same Option should be used when reporting a service.

Note: PEI Services include Evidence Based Practices (EBP), Community Defined Evidence (CDE), Promising / Pilot Practices (PP), and Other PEI.

Option 1 Codes*:

Choose one (1) of the following codes for services that involve neither Evidence-Based Practices nor Service Strategies nor PEI Services. If either of the following codes is chosen, no additional codes can be selected for the service:

00	=	No EBP/SS	No Evidence-Based Practice/Service Strategy
99	=	UK EBP/SS	Unknown Evidence-Based Practice/Service Strategy

Option 2 Codes*:

Choose up to three (3) of the following codes for PEI Services. One (1) code MUST be a PEI Service code. In addition, up to two (2) additional Service Strategy codes may be selected.

PEI EVIDENCE-BASED PRACTICES (EBP)

10	=	EBP MST	Multisystemic Therapy
11	=	EBP FFT	Functional Family Therapy
2A	=	Brf Strat FamTher	Brief Strategic Family Therapy
2B	=	CPP Chld-Prnt Ther	Child-Parent Psychotherapy (CPP)
2C	=	CBITS	Cognitive Behavioral Intervention for Trauma in Schools (CBITS)
2F	=	DTQI-Dep Treat QI	Depression Treatment Quality Improvement Intervention
2J	=	Group CBT Maj Dep	Group CBT for Major Depression
2L	=	Incredible Years	Incredible Years (IY)
2M	=	IPT Depression	Interpersonal Psychotherapy for Depression (IPT)
2P	=	Multidim Fam Ther	Multidimensional Family Therapy
2R	=	PCIT	Parent-Child Interaction Therapy (PCIT)
2T	=	Prolong Exps PTSD	Prolonged Exposure for PTSD (PE-PTSD)
2V	=	Strengthen Famili	Strengthening Families
2W	=	Trauma Foc CBT	Trauma Focused CBT (TF_CBT)
2Y	=	Triple P	Triple P Positive Parenting Program

COMMUNITY DEFINED EVIDENCE (CDE)

3B	=	Caring Our Famili	Caring for Our Families
3D	=	GLBT Champs	GLBT Champs
3E	=	LIFE Program	Loving Intervention for Family Enrichment (LIFE) Program
3M	=	UCLA Ties	UCLA Ties Transition Model

PROMISING / PILOT PRACTICES (PP)

4A	=	ART-Aggress Replc	Aggression Replacement Training (ART)
4D	=	CORS-Crisis Recov	Crisis Oriented Recovery Services
4E	=	EDIPP	Early Detection and Intervention for the Prevention of Psychosis (EDIPP)
4K	=	MAP-Mng Adap Prac	Managing and Adapting Practice (MAP)
4N	=	Seeking Safety	Seeking Safety

EVIDENCE-BASED PRACTICES / SERVICE STRATEGIES/PEI SERVICES (con't)

OTHER PEI

7A	=	START	School Threat Assessment Response Team (START)
7B	=	Stigma-Discrim	Stigma and Discrimination
7C	=	Suicid Prev Hotln	Suicide Prevention Hotline
7D	=	PC Latina Youth	Pacific Clinic's Latina Youth Program
7E	=	HlthCarePtnr+60	Health Care Partners +60
7F	=	Suicide Prev Spec	Suicide Prevention Specialist Team
7G	=	OA Primary Care	Older Adult Primary Care Partnership
7H	=	Prtmr Hosp Afrcre	Partnership with Hospitals for aftercare
7J	=	Surviv Supp Grp	Support Group for Survivors and Bereaved
7K	=	Trng Comm Partner	Training Community Partners
7L	=	Prtmr Law Enforce	Partnerships with Law Enforcement and First Responders
7M	=	Onlin Suicde Prev	Distant and On-Line Learning for Suicide Prevention
7N	=	SchBase MH PEI OE	School based Targeted MH Prevention and Early Intervention–Outreach & Engagement
7P	=	PEERS	PEERS – Embracing Empowerment and Resilience Support Network
7Q	=	ESI - MH Consult	Early Screening, Identification and Mental Health Consultation
7R	=	Prtmr Student Ach	Partners in Student Achievement

SERVICE STRATEGIES (SS)

50	=	SS Peer &/or Fam	Peer and/or Family Delivered Services
51	=	SS Psy/Edu	Psychoeducation
52	=	SS Fam/Sup	Family Support
53	=	SS Sup/Edu	Supportive Education
54	=	SS Ptnr LawEnf	Delivered in Partnership with Law Enforcement (includes courts, probation, etc.)
55	=	SS Ptnr HlthCare	Delivered in Partnership with Health Care
56	=	SS Ptnr SocSvcs	Delivered in Partnership with Social Services
57	=	SS Ptnr SubAbuse	Delivered in Partnership with Substance Abuse Services
58	=	SS Integ Aging	Integrated Services for Mental Health and Aging
59	=	SS Integrated DD	Integrated Services for Mental Health and Developmental Disability
60	=	SS Eth-Spc.	Ethnic-Specific Service Strategy
61	=	SS Age-Spc.	Age-Specific Service Strategy

Option 3 Codes*:

Up to three (3) of the following codes may be used for non-PEI Services that involve some type of EBP/SS:

EVIDENCE-BASED PRACTICES (EBP)

01	=	EBP ACT	Assertive Community Treatment
10	=	EBP MST	Multisystemic Therapy
11	=	EBP FFT	Functional Family Therapy

SERVICE STRATEGIES (SS)

50	=	SS Peer &/or Fam	Peer and/or Family Delivered Services
51	=	SS Psy/Edu	Psychoeducation
52	=	SS Fam/Sup	Family Support
53	=	SS Sup/Edu	Supportive Education
54	=	SS Ptnr LawEnf	Delivered in Partnership with Law Enforcement (includes courts, probation, etc.)
55	=	SS Ptnr HlthCare	Delivered in Partnership with Health Care

EVIDENCE-BASED PRACTICES / SERVICE STRATEGIES/PEI SERVICES (con't)

56	=	SS Ptnr SocSvcs	Delivered in Partnership with Social Services
57	=	SS Ptnr SubAbuse	Delivered in Partnership with Substance Abuse Services
58	=	SS Integ Aging	Integrated Services for Mental Health and Aging
59	=	SS Integrated DD	Integrated Services for Mental Health and Developmental Disability
60	=	SS Eth-Spc.	Ethnic-Specific Service Strategy
61	=	SS Age-Spc.	Age-Specific Service Strategy

FINANCIAL RESPONSIBILITY CATEGORIES

NOTE:

All payment sources available to the client must be indicated. Do not omit “County” funds when combined with other sources of payment.

County

Short-Doyle/Medi-Cal

Client or Family

Medicare*

Champus

Insurance and other Third Party

HMO/PHP

Unknown

*If Medicare is indicated as a Financial Responsibility (“Y”), a Medicare number is then required. The first digit may be numeric or alpha and the following eight digits are numeric. The last three digits may be alpha or numeric according to the number found on the client’s Medicare card.

GENDER

<u>Codes</u>	<u>Description</u>
M	Male
F	Female
O	Other – Includes gender changes, undetermined gender and live birth with congenital abnormalities which obscure gender identification.
U	Unknown/Not Reported – Indicates that the gender of the client was not available.

HANDICAP INDICATOR CODES

<u>Code</u>	<u>Handicap</u>
00	Not physically disabled/no significant disability
01	Blindness or severe visual impairment
02	Deafness or severe hearing impairment
03	Speech impairment
04	Physical impairment (e.g., mobility impairment, chronic diseases, etc.)
05	Developmental disabilities (e.g., learning disabilities, epilepsy, etc.)
12	Blindness and deafness
13	Blindness and speech impairment
14	Blindness and physical impairment
15	Blindness and developmentally disabled
16	Blindness and conditions other than those listed in codes 12 through 15
23	Deafness and speech impairment
24	Deafness and physical impairment
25	Deafness and developmentally disabled
26	Deafness and conditions other than those listed in codes 23 through 25
34	Speech impairment and physical impairment
35	Speech impairment and developmentally disabled
36	Speech impairment and conditions other than those listed in codes 34 and 35
45	Physical impairment and developmentally disabled
46	Physical impairment and conditions other than developmentally disabled
56	Developmentally disabled and other
57	Development disabilities/Multiple physical disabilities
06	Physical disability other than any of the above

HANDICAP INDICATOR CODES (con't.)

<u>Code</u>	<u>Handicap</u>
60	No physical or mental disability
80	Mental Disability
81	Mental Disability/Blindness
82	Mental Disability/Deafness
83	Mental Disability/Speech Impairment
84	Mental Disability/Physical Impairment
85	Mental Disability/Developmental Disability
87	Mental Disability/Multiple Physical Disabilities
99	Unknown

HMO/PHP

<u>Code</u>	<u>Description</u>
A	LA Care
B	Blue Cross of California – California Care
C	Care 1 st
D	Maxicare
E	Tower Health Plan
F	United Health Plan
G	Community Health Plan
H	Kaiser
I	Foundation Health
J	Friendly Hills
K	Molina
L	Universal Health
M	Blue Shield
N	Health Net
O	United Health Care
Y	PAP
Z	Not currently enrolled in a HMO*

* It is not necessary to use this code for clients who are not enrolled in a health plan. This code is needed to replace a code that was previously applied, but the client is no longer enrolled in a health plan.

INTENT OF SERVICE

Code Description/Explanation

- 1 Assessment Services are provided to assess the client's impairment level and/or problem areas of functioning and, if treatment for improvement or maintenance is appropriate, to refer the client to a unit where these services are available. **Where an evaluation is done as part of the treatment process, the intent of service is improvement or maintenance.**
- 2 Improvement Services are provided to improve the current level of functioning of the client.
- 3 Maintenance Services are provided primarily to stabilize the client's present level of functioning.

NOTE:

Where improvement and maintenance services are being provided by the same unit and only one admission document is to be used, the intent of service is improvement.

LANGUAGES

<u>Code</u>	<u>Language</u>	<u>Code</u>	<u>Language</u>	<u>Code</u>	<u>Language</u>
19	Afghan, Pashto, Pusho	40	Hungarian	59	Romanian
20	Afrikaans			60	Russian
17	American Sign	41	Ibonese		
21	Arabic	42	Igorot		
18	Armenian	43	Italian	10	Samoan
		44	Ilocano or Iloko	61	Serbo-Croatian
23	Bengali	45	Ilongot	62	Singhalese
24	Bulgarian			02	Spanish
25	Burman or Burmese	08	Japanese	63	Swahili
				04	Swatowese
26	Calo	46	Konkani	64	Swedish
27	Cambodian	09	Korean		
06	Cantonese			11	Tagalog (see Filipino)
28	Cebuano	47	Lao	65	Taiwanese
07	Chinese, other	48	Lingala or Ngala	66	Telegu
29	Choctaw	49	Lithuanian	67	Thai
30	Creole			05	Toisan
31	Czech	03	Mandarin	68	Tonga
		50	Marathi	69	Turkish or Ottoman
32	Danish	36	Mien		
33	Dutch			71	Ukranian
		51	Norwegian	70	Urdu
01	English				
34	Ethiopian	54	Other Sign	12	Vietnamese
		75	Other Non-English	72	Visayan
22	Farsi				
15	French	52	Pakistani	73	Yao
11	Filipino, Tagalog	53	Pangasinan	14	Yiddish
		56	Polish	74	Yoruba
16	German	57	Portuguese		
35	Greek	58	Punjabi	98	Unknown/Not Reported
				99	Other
13	Hebrew				
37	Hindi				
38	Hindustani				
39	Hmong				

LATE CODES (DELAY CODES)

These codes are required when a claim is submitted late (past contracted date of filing limitations) and any of the codes below apply.

<u>Code</u>	<u>Description</u>
1	Proof of Eligibility Unknown or Unavailable
2	Litigation (<i>not accepted by the State</i>)
5	Delay in Supplying Billing Forms (<i>not accepted by the State</i>)
6	Delay in Delivery of Custom-made Appliances (<i>not accepted by the State</i>)
7	Third Party Processing Delay (FFS 2 providers – Do not use)
8	Delay in Eligibility Determination
9	Original Claim Rejected or Denied Due to a Reason Unrelated to the Billing Limitation Rules (<i>not accepted by the State</i>)
10*	Administration Delay in the Prior Approval Process (<i>not accepted by the State</i>)
11	Other (FFS 2 TAR delay use only)

*** The State is presently clarifying the conditions for this late code which will be made available upon receipt from the State (refer to RMD Bulletins: NGA 09-015 and DMH 09-016)**

(not accepted by the State) – Do not use any of these codes.

LEGAL STATUS

<u>Code</u>	<u>Description</u>
0702.3	Minor not guilty by reason of insanity. Court ordered evaluation. (W & I)
0717.0	Juvenile Court placement. (W & I)
1001.2	Admission by court to DD services only for non-LPS State Hospital. (PC)
1026.0	Adult not guilty by reason of insanity. (PC)
1026.2	Restoration of sanity. Application for release from treatment. A code used for discharge. (PC)
1026.3	Placed on outpatient status pursuant to 1026.2. (PC)
1026.4	Escape on 1026; to be imprisoned; discharge code. (PC)
1201.0	Found insane before judgment and admitted to State Hospital. (PC)
1364.0	Convicted sex offender/Department of Corrections; sex offense against person under age 14. Code for admission/discharge from State Hospital. (PC)
1368.0	Court determination of mental competence to stand trial (to be used with reference code 80). (PC)
1369.0	Trial on issue of mental competence for DD. Court ordered hold. Evaluation to determine competency to stand trial. (PC)
1370.0	Incompetent to stand trial (Title 18). Resolution of competency. Committed or dismissed. (PC)
1370.1	DD placement for non-LPS treatment. Incompetent to stand trial. (PC)
1370.3	Placement of 1370.0 on outpatient status from State Hospital (Title 15, Sec. 1600). (PC)

LEGAL STATUS (con't.)

<u>Code</u>	<u>Description</u>
1370.4	Conditions for court ordered conservator/outpatient supervisor proceedings prior to 1370.3. (PC)
1370.7	Court ordered treatment incompetent mentally disordered. (PC1370.a.1)
1370.8	Court ordered evaluation prior to PC 1370.a.1 above. (PC 1370.a.2)
1370.9	Court ordered transfer of incompetent MD defendant to local program. (PC 1370.a.3)
1372.1	Competency regained. Defendant returned to court. Code used for discharge. (PC 1372.c)
1372.5	Recommitted by court. Extended incompetent to stand trial of MD defendant. (PC 1372.e)
1374.0	Competency of 1370.3 regained. A discharge code; defendant returned to court pursuant to 1372. (PC)
1600.0	Outpatient treatment of judicially committed. (PC 1026.0)
1601.0	Court granted or denied outpatient status pursuant to 1600. (PC)
1602.0	Forensic evaluation of 1601.0 MDO for outpatient. (PC)
603.0	Placement of PC 1601.0 on outpatient status. (PC)
1604.2	Recommendation for outpatient status of PC 1602 or PC 1603. (PC1604.b)
1604.3	To outpatient status on court approval. (PC 1604.d)
1606.0	Annual review MDO on outpatient status. (PC)
1607.0	Regained competency/no longer 1370, 1026, 6316, MDSO, or 2964. (PC)

LEGAL STATUS (con't.)

<u>Code</u>	<u>Description</u>
1608.0	Request for revocation of 1604.d above. (PC)
1609.0	Reconfinement on 1604d/11602 or 1026.2. (PC)
1610.0	Temporary admission pursuant to PC 1608 or PC 1609, pending court revocation of PC 1026, MDSO, or 1370. (PC)
1611.0	Temporary admission of MD PC 1026 on parole. (PC - Repealed in 1984)
1612.0	Same as 1026.2. A discharge code - restrictions on release for treatment. (PC)
1614.0	Same as former PC 1026.1, PC 1374, and W & I 6325.1a. Person ordered to undergo outpatient treatment. (PC)
1615.0	Conditional Release Program (CONREP) for W & I 5709.8 for judicially committed patients. (PC)
1753.0	Youth Authority Observation (YOA). (W & I)
1756.0	Youth Authority Certification (YAC) for State Hospital Admission and discharge. (W & I)
2684.0	Department of Corrections prisoner certification for DD/MD treatment in State Hospital. (PC)
2692.0	Housing/care/treatment of inmates with AIDS. (PC)
2960.0	Dept. of Corrections prisoner evaluation and provision for appropriate mental treatment. (PC)
2962.0	Mentally Disordered (MD) parolees referred from Department of Corrections. (PC)
2964.0	MD parolees rehospitalized from outpatient. (PC)

LEGAL STATUS (con't.)

<u>Code</u>	<u>Description</u>
2968.0	Parolees' mental disorder in remission and treatment discontinued. (PC)
2970.0	Former parolees referred from Superior Court for continued involuntary treatment for one year. (PC)
2972.0	Recommitted parolee under PC 2962 or PC 2970. (PC)
2974.0	MD inmate/parolee commitment to State Hospital. (PC)
3701.0	Insane prisoner under death penalty. (PC)
3702.0	
3703.0	
4011.6	MI jail prisoner transfer for <u>involuntary</u> admissions (72-hr eval). And for return to penal facility. (PC)
4011.8	MI jail prisoner transfer for <u>voluntary</u> admission to 72-hr facility. And for return to jail. (PC)
4653.0	DD admitted to non-LPS State Hospital. Upon discharge, referral to regional center. (W & I)
4800.0	DD (non LPS) administrative hold on judicial review by writ of habeas corpus. (W & I)
4803.0	DD (non LPS) Regional Center certification and recommendation for community care facility. (W & I)
4825.0	DD (non LPS) voluntary adult. May leave hospital at any time. (W & I)
5008.2	Murphy's MD conservator ship - incompetent to stand trial, felon, violent - relative to 5350.0. (W & I)
050.0	Court ordered observation. Same as 5554 and 5206.0. Repealed in 1967. (W & I)
5128.0	Civil commitment of MI. See 8050-8053. Repealed in 1967. (W & I)

LEGAL STATUS (con't.)

<u>Code</u>	<u>Description</u>
5150.0	2-hr MD detention. Act of taking into custody/placing into treatment at 72-hr facility. (W & I)
5151.0	72-hr MD detention and treatment - actually only defines the 72-hr period. (W & I)
5152.0	Release from 72-hr detention and referral to care/treatment on voluntary basis or conservator appointed. (W & I)
5170.0	72-hr detention of MD <u>inebriate</u> . (W & I)
5171.0	Same as 5150.0 only for <u>inebriate</u> . (W & I)
5172.0	Same as 5152.0 only for <u>inebriate</u> . (W & I)
5172.1	Voluntary 72-hr MD <u>inebriate</u> .
5200.0	Court ordered 72-hr evaluation of MD. (W & I)
5206.0	Court ordered 72-hr evaluation by petition. Old W & I 5050.0. (W & I)
5208.0	Serving of petition and order for 72-hour evaluation. (W & I)
5213.0	Same as 5151.0 - defines 72-hour. (W & I)
5225.0	Court ordered eval of MD Alcohol/Drug. (W & I)
5230.0	Same as 5170.0 (impairment by chronic alcoholism) (W & I)
5250.0	14-day certification for treatment for mental disorder or chronic alcoholism. (W & I)
5250.1	Unconditional release from 14-day intensive treatment. (W & I)
5256.5	Termination of involuntary detention for mental disorder or chronic alcoholism. (W & I)
5256.6	14-day certification - same as 5250.0. (W & I)

LEGAL STATUS (con't.)

<u>Code</u>	<u>Description</u>
5257.0	Termination of involuntary MD or chronic alcoholism commitment. (W & I)
5260.0	Added 14 days for suicidal persons. (W & I)
5270.1	Gravely disable. 30 day extension of involuntary psychiatric treatment beyond 14 day certification. (W5270.15)
5300.0	Added 180 days for persons who are serious threat of physical harm to others. (W & I)
5301.0	Petition for post-certification. (W & I)
5303.0	Due process and trial pursuant to 5301. (W & I)
5304.0	Added 180 day post-certification after petition trial. (W & I)
5305.0	Placed on outpatient status pursuant to 5300.0. (W & I)
5308.0	Temporary admission post certification. Revocation of outpatient status under W&I 5306.5 or 5307, confined to State Hospital or treatment facility. (W & I)
5309.0	Release from involuntary hospital treatment. (W&I)
5352.0	Recommend and petition for conservator ship. (W & I)
5352.1	Court established temporary conservatorship not to exceed 30 days pursuant to 5354. (W & I)
5352.3	3 day extension of 14 day certification pending temporary conservatorship (see 5352.1). (W & I)
5353.0	Temporary conservator ship pending determination of conservatorship. (W & I)
5358.0	Rules governing conservatee's placement in treatment. (W & I)
5358.5	Conservatee taken into custody by conservator. (W & I)

LEGAL STATUS (con't.)

<u>Code</u>	<u>Description</u>
5359.0	Alternative placement for conservatee. (W & I)
5361.0	Termination and reappointment of conservator. (W & I)
5366.1	Detention for 72-hr evaluation pursuant to 5150 detention for 180 days evaluation and pursuant to 6000 to 6019. (W & I)
5585.5	72-hr involuntary commitment of minors for eval and treatment of dangerous MDs who refuse voluntary treatment. (W5585.5)
6000.0	VOLUNTARY admission of MD. (W & I)
6316.0	MDSO treatment and observation. (W & I)
6316.1	MDSO maximum confinement equal maximum prison term possible for the felony or misdemeanor. (W & I)
6316.2	MDSO return to court. Confinement longer than 6316.1. (W & I)
6316.3	Court ordered transfer of MDSO between State and County. (W & I)
6325.0	Certification as to recovery (or not) of MDSO on outpatient status. Return to court. (W & I)
6325.1	MDSO temporary State Hospital admission. (W & I)
6325.8	Recovery of 6325. (W & I 6325.a)
6325.9	Still a danger of 6325. (W & I 6325.b)
6327.0	Court ordered hearing. Disposition of MDSO under treatment. Return to court or recommitment to treatment. (W & I)
6500.0	Dangerous MR committed by court. (W & I)
6500.1	Same as 6500.0 and renumbered as such in 1978. (W & I)

LEGAL STATUS (con't.)

<u>Code</u>	<u>Description</u>
6506.0	Court ordered hold pending hearing on custody, care and treatment funding pursuant to 6503. (W & I)
6509.0	Court ordered commitment of MR dangerous to self and others. May be non-resident pursuant to 4461. (W & I)
6551.0	Juvenile Court 72-hr observation to determine MD or MR and certification for 14 days treatment of mental disorder. (W & I)
6552.0	Juvenile ward of court voluntary application for mental health services. (W & I)
7226.0	MDO military personnel admission to State Hospital. (W & I)
7302.0	State Hospital transfer. (W & I)
7325.0	Apprehended judicially committed escapees. (W & I)
7329.0	Arrest of non-California resident escapees. (W & I)
7361.0	Unrecovered judicially committed patient court ordered discharge from State Hospital. (W & I)
7362.0	Patient discharged by State Hospital. Not a proper case for treatment, or is DD or chronic harmless MD. May or may not be judicially committed. (W & I)
7375.0	Temporary admission of PC 1026. (W & I 7573.0)
7375.3	Admission pending parole relocation. (W & I 7573.f.3)
7375.4	Admission pending parole relocation. (W & I 7573.f.4)
7375.9	Temporary admission of PC 1026, NGI (not guilty by reason of insanity) adult. (W & I TANGI)
999.9	Unknown.

LEVEL OF CARE

There are five levels of case management services that are driven by the assessed needs of the individual client. It is understood that at some time clients may need services at all levels.

LEVEL I

Stable/Maintenance

Includes clients with a mental health problem that is neither acute nor serious and persistent or which is unclear.

LEVEL II

Brief

Includes clients with an acute disorder, which responds to a relatively brief clinical intervention without the need for intensive rehabilitation services.

LEVEL III

Intensive

Includes clients with serious and persistent mental illness who need rehabilitative services, especially case management to achieve the desired level of functioning. Also included are clients experiencing their first acute episode of severe mental illness.

LEVEL IV

Identified ISR

Includes clients who meet the criteria for Intensive Service Recipients (i.e., individuals that have been hospitalized six or more times during a rolling twelve-month period).

LEVEL V

Enrolled ISR

Would include all clients who are ISRs and have been enrolled in an ISR program.

MILESTONES OF RECOVERY SCALE

There are eight levels of Milestones of Recovery Scale (MORS). The scale measures degree of client recovery based on three underlying assumptions: Their level of risk, their level of engagement with mental health system and their level of skills and supports.

1. “Extreme risk” - These individuals are frequently and recurrently dangerous to themselves or others for prolonged periods. They are frequently taken to hospitals and/or jails or are institutionalized in the state hospital or an IMD. They are unable to function well enough to meet their basic needs even with assistance. It is extremely unlikely that they can be served safely in the community.

LEVEL OF CARE - (con't.)

2. “High risk/not engaged”- These individuals often are disruptive and are often taken to hospitals and/or jails. They usually have high symptom distress. They are often homeless and may be actively abusing drugs or alcohol and experiencing negative consequences from it. They may have a serious co-occurring medical condition (e.g., HIV, diabetes) or other disability which they are not actively managing. They often engage in high-risk behaviors (e.g., unsafe sex, sharing needles, wandering the streets at night, exchanging sex for drugs or money, fighting, selling drugs, stealing, etc.). They may not believe they have a mental illness and tend to refuse psychiatric medications. They experience great difficulty making their way in the world and are not self-supportive in any way. They are not participating voluntarily in ongoing mental health treatment or are very uncooperative toward mental health providers.

3. “High risk/engaged” – These individuals differ from group 2 only in that they are participating voluntarily and cooperating in ongoing mental health treatment. They are still experiencing high distress and disruption and are low functioning and not self-supportive in any way.

4. “Poorly coping/not engaged” – These individuals are not disruptive. They are generally not a danger to self or others and it is unusual for them to be taken to hospitals and/or jails. They may have moderate to high symptom distress. They may use drugs or alcohol which may be causing moderate but intermittent disruption in their lives. They may not think they have a mental illness and are unlikely to be taking psychiatric medications. They may have deficits in several activities of daily living and need a great deal of support. They are not participating voluntarily in ongoing mental health treatment and/or are very uncooperative toward mental health providers.

5. “Poorly coping/engaged” – These individuals differ from group 4 only in that they are voluntarily participating and cooperating in ongoing mental health treatment. They may use drugs or alcohol which may be causing moderate but intermittent disruption in their lives. They are generally not a danger to self or others and it is unusual for them to be taken to hospitals and/or jails. They may have moderate to high symptom distress. They are not functioning well and require a great deal of support.

6. “Coping/rehabilitating” – These individuals are abstinent or have minimal impairment from drugs or alcohol. They are rarely being taken to hospitals and almost never being taken to jail. They are managing their symptom distress usually, though not always, through medication. They are actively setting and pursuing some quality of life goals and have begun the process of establishing “non-disabled” roles. They often need substantial support and guidance but they aren’t necessarily compliant with mental health providers. They may be productive in some meaningful roles, but they are not necessarily working or going to school. They may be “testing the employment or education waters,” but this group also includes individuals who have “retired.” That is, currently they express little desire to take on (and may actively resist) the increased responsibilities of work or school, but they are more or less content and satisfied with their lives.

LEVEL OF CARE - (con't.)

7. “Early Recovery” – These individuals are actively managing their mental health treatment to the extent that mental health staff rarely need to anticipate or respond to problems with them. Like group 6, they are rarely using hospitals and are not being taken to jails. Like group 6, they are abstinent or have minimal impairment from drugs or alcohol and they are managing their symptom distress. With minimal support from staff, they are setting, pursuing and achieving many quality of life goals (e.g., work and education) and have established roles in the greater (non-disabled) community. They are actively managing any physical health disabilities or disorders they may have (e.g., HIV, diabetes). They are functioning in many life areas and are very self-supporting or productive in meaningful roles. They usually have a well-defined social support network including friends and/or family.

8. “Advanced Recovery” – These individuals differ from group 7 in that they are completely self-supporting. If they are receiving any public benefits, they are generally restricted to Medicaid or some other form of health benefits or health insurance because their employer does not provide health insurance. While they may still identify themselves as having a mental illness, they are no longer psychiatrically disabled. They are basically indistinguishable from their non-disabled neighbor.

LIVING ARRANGEMENT

NOTE:

Report at admission, annually thereafter, and at formal discharge.

- The data elements of Admission and Discharge Living Arrangement are intended to capture the client's usual place of residence. Codes 14, 15, and 16 "No identifiable residence," are to be used to indicate that the client is homeless. In general, anyone who is in a homeless shelter or is eligible for entry into a shelter and has no place else to go should be coded as No Identifiable Residence "(homeless)".

<u>Code</u>	<u>Living Arrangement Description</u>
01	Lives alone in house or apartment
02	Lives with immediate family-spouse, parents, and/or children
03	Lives with extended family; i.e., relatives
04	Lives with friend but not unmarried partner
05	Lives with unmarried partner
06	Lives with foster family (children's code)
07	Small community residential facility (long term, short term, onsite, offsite) of 6 or less
08	Large community residential facility of 7 or more
09	Skilled nursing home/Intermediate Care Facility (SNF/ICF)
10	Community hospital or psychiatric health facility (acute hospital or non-hospital acute)
11	State Hospital
12	Justice related facility; e.g., Juvenile Hall, Community Correctional Facility, CYA Home, Jail Inpatient
13	Group quarters; e.g., Dorm, Barracks, Migrant Camp. YMCA
14*	No identifiable residence - Alone. A street person
15*	No identifiable residence - lives with relative (street person, has no residence in shelter)
16*	No identifiable residence - lives with non-relatives, friend, or unmarried partner
17	Other - Alone in other formal residence, hotel temporary accommodations, etc.
18	Other - Lives with relative in other formal residence, hotel temporary accommodations, etc.
19	Other - Lives with non-relative-friend in other formal residence, hotel temporary accommodations, etc.
20	Other - Lives with non-relative-unmarried partner in other formal residence, hotel temporary accommodations, etc.
21	Supervised independent living (adult) - Alone
22	Supervised independent living (adult) - Lives with friend(s)
99	Unknown - Living arrangement is not known

MARITAL STATUS

<u>Code</u>	<u>Marital Status</u>
1	Never married
2	Now married (includes common-law)
3	Widowed
4	Dissolved (includes divorced, annulled)
5	Separated
9	Unknown

MEDICATION MONITORING EXCEPTION MESSAGES

<u>Code</u>	<u>Description</u>	<u>Status</u>
01	<u>unusual medication for diagnosis</u>	Review or Auth Req
02	<u>principle diagnosis not SD acceptable</u>	Auth Req
03-06	inactive codes	
07*	<u>unusual medication dosage for age</u> of patient	Review
08	<u>unusual medication for age</u> of patient	Review or Auth Req
09	<u>unusual medication</u>	Auth Req
10*	<u>drug type duplication</u>	Auth Req
11	definite <u>drug allergy/serious side effect</u>	Auth Req
12*	<u>overlapping supply</u>	Auth Req
13	<u>administered more than 60 days</u> past order date	Review
14	<u>medication order discontinued</u>	Review

Auth Req (Authorization Required): a prescription cannot be filled until it has been reviewed and approved.

Review (prior to renewal): a prescription can be filled, but the same prescription cannot be renewed nor can a new prescription for the same medication be entered into the system until the original prescription has been reviewed and approved

- Authorizer is Prescriber

MENTAL HEALTH DISTRICT

These codes are applicable to the Directory of Providers and reports.

<u>Code</u>	<u>Mental Health District</u>
ARC	Arcadia
AV	Avalon
CD	Compton-Downey
EC	El Camino
ELA	East Los Angeles
EV	East Valley
HLY	Hollywood
LBH	Long Beach-Harbor
LP	La Puente Valley
MET	Metropolitan
NC	North County
NE	Northeast
RH	Rio Hondo
SB	South Bay
SMW	Santa Monica West
SNT	San Antonio
SV	Sierra Vista
TRC	Tri-City Mental Health Authority
WBK	Willowbrook
WC	West Central
WV	West Valley
NA	Not Applicable

***OTHER FACTORS AFFECTING MENTAL HEALTH
Physical Health Disorders***

PURPOSE:

Indicates if physical health disorders affect the mental health of the client.

NOTE:

Report at admission, annually thereafter, and at formal discharge.

<u>Codes</u>	<u>Description</u>
Y	Yes
N	No
U	Unknown, Not Reported

***OTHER FACTORS AFFECTING MENTAL HEALTH
Developmental Disabilities***

PURPOSE:

Indicates if developmental disabilities affect the mental health of the client.

NOTE:

Report at admission, annually thereafter, and at formal discharge.

<u>Codes</u>	<u>Description</u>
Y	Yes
N	No
U	Unknown, Not Reported

***OTHER FACTORS AFFECTING MENTAL HEALTH
Dual Diagnosis***

PURPOSE:

Indicates if substance abuse affects the mental health of the client.

NOTE:

Report at admission, annually thereafter, and at formal discharge.

<u>Codes</u>	<u>Description</u>
Y	Yes
N	No
U	Unknown, Not Reported

OPERATIONS CODES

<u>Code</u>	<u>Description of Operation</u>
DMH	Department of Mental Health
DHS	Department of Health Services
FFS	Fee-For-Service
NGA	Non-Governmental Agency
OPA	Other Public Agency
NA	Not Applicable

PATIENT STATUS CODE

Indicates the status of the client as of the ending date of service.

VALID CODES:

<u>Code</u>	<u>Description</u>
A	= Still a patient or expected to return
B	= Discharged to home, self care, foster care, shelter care
C	= Discharged/transferred to Residential/Board and Care (not locked, supervised living, no treatment)
D	= Discharged/transferred to Community Residential Treatment (not locked, custodial)
E	= Discharged/transferred to Community Treatment Facility (locked, no nursing care)
F	= Discharged/transferred to Skilled Nursing Facility/Intermediate Care Facility (unlocked or locked)
G	= Discharged/transferred to Acute Care Hospital or Psychiatric Health Facility (PHF)
H	= Discharged/transferred to State Hospital
I	= Discharged/transferred to Jail
J	= Unplanned discharge
K	= Expired
L	= Other
U	= Unknown Not Reported

NOTE: *The above codes are only applicable to Inpatient Episodes.*

PLACE OF BIRTH

The field consists of three separate subfields: Birth County, Birth State, Birth Country. All subfields must be completed.

CLIENT BORN IN CALIFORNIA

If county of birth is known, enter the two digit county code listed in the Valid California Codes section for the Birth County, 'CA' for the Birth State, and 'US' for the Birth Country.

If county of birth is not known, enter '99' for Birth County, 'CA' for the Birth State, and 'US' for the Birth Country.

CLIENT BORN OUTSIDE CALIFORNIA BUT INSIDE UNITED STATES

If state of birth is known, enter '00' for the Birth County, the two character alphabetic code listed in the Valid State Codes section (which is the U.S. Postal code for states) for the Birth State, and 'US' for the Birth Country.

If state of birth is not known, enter '00' for the Birth County, 'UN' for the Birth State, and 'US' for the Birth Country.

CLIENT BORN OUTSIDE UNITED STATES

If the country of birth is unknown, enter '00' for the Birth County, '00' for the Birth State, and '99' for the Birth Country.

If the country of birth is known but not listed, enter '00' for the Birth County, '00' for the Birth State, and '00' for the Birth Country.

PRIMARY PROMBLEM AREA

<u>Code</u>	<u>Description</u>
0	Inadequate information
1	Mentally ill, disabled
2	Developmentally disabled
3	Alcoholism
4	Drug Abuse
5	Mentally disordered offender
6	Dual Diagnosis – Mentally Ill and/or Drug Abuse, Alcoholism
7	Problems accessing health care
8	Problems with legal system/crime
9	Other psychosocial problems

PROGRAM AREA

<u>Code</u>	<u>Program Area</u>
06	Child Abuse/Neglect
02	Children's Services other than Abuse, Neglect, School
05	Community/Domestic Violence
36	Community Linkage/Monitoring Linkages
12	Disaster Response
42	Drop-In-Center
39	Education (Client/Family/Significant Other Classes)
33	Engaging Clients & Families (Significant Others/Guardians)
32	Enriched Residential Services
10	Geriatric Services
28	Homeless Mentally Ill
14	Housing/Community Care
34	Identifying Needed Services in Community & Mapping Available Services
26	Information/Referral Only
13	Job Development/Mentally Disabled
03	Law Enforcement/Justice System
19	Minority Mental Health Issues
21	Occupational Health
04	Other Health/Human Services
09	Parent Training
41	Peer Support
35	Recruiting, Engaging & Working with Community Based Agencies
18	Refugee/Immigration Problems
31	Residential & Bridging Services
22	Resource Development - Financial
23	Resource Development - Programs
01	School Problems
37	Self Help/Advocacy Activities
24	Service Utilization Mental Health
07	Sexual Abuse Rape Adult
25	Socialization
17	Stigma/Community Acceptance
20	Stress
27	Substance Abuse
43	Suicide Prevention
40	Training (Staff Classes)
38	Vocational Activities
29	Welfare to Work

REFERRAL IN CODES

County Mental Health Facilities

INPATIENT/RESIDENTIAL (Revised June 2006)

<u>Code</u>	<u>Description</u>
10	State Hospital (LPS Program)
12	County operated Inpatient
13	County contracted Inpatient
20	Psychiatric Diversion Program (PDP)
25	County operated Residential
27	County contracted Residential

OUTPATIENT

<u>Code</u>	<u>Description</u>
*11	Project ABC
15	State operated
16	County operated
17	County contracted
19	Tri-Cities Programs
74	FFS Network Provider
76	Linkage Agency

PARTIAL DAY CARE

<u>Code</u>	<u>Description</u>
21	County operated
22	County contracted
24	Tri-Cities Programs

OTHER

<u>Code</u>	<u>Description</u>
26	Case Management
28	Community Outreach

** This code is only applicable to Project ABC providers.*

REFERRAL IN CODES (con't.)

Non-County Mental Health Facilities

INPATIENT/RESIDENTIAL (Revised July 2005)

<u>Code</u>	<u>Description</u>
29	State Hospital (Non-LPS Program)

<u>Code</u>	<u>Description</u>
30	Psychiatric service of a general hospital
32	Psychiatric service of a military or veterans hospital
33	Private psychiatric hospital
34	LA Care
35	Foundation Health
36	Other residential facility for treatment of mental illness

OUTPATIENT

<u>Code</u>	<u>Description</u>
40	Private mental health professional
42	Private psychiatric clinic/counseling service
43	Military or veterans outpatient psychiatric service
49	Self-help association

REHABILITATION/PARTIAL DAY CARE

<u>Code</u>	<u>Description</u>
53	Military or veterans rehabilitation center
54	Other day treatment/rehabilitation center day training, sheltered workshop for mentally ill

OTHER

<u>Code</u>	<u>Description</u>
56	Suicide prevention and other telephone hotlines

REFERRAL IN CODES (con't.)

Auxiliary and Generic 24-hour Health Services, non-County

<u>Code</u>	<u>Description</u>
59	Board and care, nursing, or convalescent home
60	Non-psychiatric service of private general hospital
61	Non-psychiatric service of general hospital
62	Non-psychiatric service of military, veterans' hospital
63	Drug/alcohol abuse detoxification facility or recovery home

OUTPATIENT/PARTIAL DAY (non-County)

<u>Code</u>	<u>Description</u>
50	Regional screening center for developmental disabilities
51	Other agency serving the developmentally disabled
52	Drug/alcohol outpatient clinic, partial day detoxification program, outreach program
65	Private physician or medical clinic
66	County health services medical clinic
69	Other medical outpatient service

Social Agencies (non-County)

<u>Code</u>	<u>Description</u>
64	County Department of Children' s Services
67	County Department of Public Social Services
68	County Department of Probation
70	Courts
71	Jail, Correctional Institution (except Probation Department)
72	School/College
73	Vocational Rehabilitation Department
75	Cal Works
80	Police/Sheriff
81	Attorney, Legal Aid
82	Public Defender
83	Employment Service
84	Public Guardian
85	Religious Organization, Clergy
86	Information and Referral Agency
87	Other Social Agency

REFERRAL IN CODES (con't.)

Other Referral Sources

<u>Code</u>	<u>Description</u>
01	Self
91	Family
92	Friends
93	Identification as a “highest utilizer” on a client listing provided by administrative headquarters
94	Compromised Immune System (CIS)

Miscellaneous Referral-Out

<u>Code</u>	<u>Description</u>
95	Other
99	Unknown

REFERRAL OUT CODES

County Mental Health Facilities

INPATIENT/RESIDENTIAL (Revised September 2006)

<u>Code</u>	<u>Description</u>
10	State Hospital (LPS Program)
12	County operated Inpatient
13	County contracted Inpatient
25	County operated Residential
27	County contracted Residential

OUTPATIENT

<u>Code</u>	<u>Description</u>
15	State operated
16	County operated
17	County contracted
19	Tri-Cities Programs
74	FFS Network Provider
76	Linkage Agency

PARTIAL DAY CARE

<u>Code</u>	<u>Description</u>
21	County operated
22	County contracted
24	Tri-Cities Programs

OTHER (Revised September 2006)

<u>Code</u>	<u>Description</u>
26	Case Management

REFERRAL OUT CODES (con't.)

Non-County Mental Health Facilities

INPATIENT/RESIDENTIAL (Revised September 2006)

<u>Code</u>	<u>Description</u>
29	State Hospital (Non-LPS Program)

<u>Code</u>	<u>Description</u>
30	Psychiatric service of a general hospital
32	Psychiatric service of a military or veterans hospital
33	Private psychiatric hospital
36	Other residential facility for treatment of mental illness

OUTPATIENT

<u>Code</u>	<u>Description</u>
40	Private mental health professional
44	Private psychiatric clinic/counseling service
45	Military or veterans outpatient psychiatric service
49	Self-help association

REHABILITATION/PARTIAL DAY CARE

<u>Code</u>	<u>Description</u>
53	Military or veterans rehabilitation center
54	Other day treatment/rehabilitation center day training, sheltered workshop for mentally ill

REFERRAL OUT CODES (con't.)

Auxiliary and Generic 24-hour Health Services, non-County

<u>Code</u>	<u>Description</u>
59	Board and care, nursing, or convalescent home
60	Non-psychiatric service of private general hospital
61	Non-psychiatric service of general hospital
62	Non-psychiatric service of military, veterans' hospital
63	Drug/alcohol abuse detoxification facility or recovery home

OUTPATIENT/PARTIAL DAY (non-County)

<u>Code</u>	<u>Description</u>
50	Regional screening center for developmental disabilities
51	Other agency serving the developmentally disabled
52	Drug/alcohol outpatient clinic, partial day detoxification program, outreach program
65	Private physician or medical clinic
66	County health services medical clinic
69	Other medical outpatient service

Social Agencies (non-County)

<u>Code</u>	<u>Description</u>
64	County Department of Children' s Services
67	County Department of Public Social Services
68	County Department of Probation
70	Courts
71	Jail, Correctional Institution (except Probation Department)
72	School/College
73	Vocational Rehabilitation Department
80	Police/Sheriff
81	Attorney, Legal Aid
82	Public Defender
83	Employment Service
84	Public Guardian
85	Religious Organization, Clergy
86	Information and Referral Agency
87	Other Social Agency

REFERRAL OUT CODES (con't.)

Other Referral Sources

<u>Code</u>	<u>Description</u>
94	Compromised Immune System (CIS)

Miscellaneous Referral-Out

<u>Code</u>	<u>Description</u>
95	Other
99	Unknown

No Referral-Out Recommendation

<u>Code</u>	<u>Description</u>
02	Client withdrew/stopped coming: Therapist thinks there is a continuing immediate need for treatment, but client has said there has been enough personal or situational improvement in order to discontinue
03	Client withdrew/stopped coming: in the intake process, the client rejected treatment plan offered by agency and refused referral
04	No current need for further care under DMH Policy
05	Client withdrew/stopped coming: Client's reason unknown
90	Client withdrew/stopped coming: Client has withdrawn prematurely because in the therapist's opinion his/her concern with the presenting crisis has abated
06	Client died
07	Client moved away
08	Referral desirable but no suitable agency available

SERVICE AREA/BUREAU

<u>Code</u>	<u>Description</u>
1 through 8	Service Area , Adult Systems of Care 1 = Service Area 1 (SA1) 2 = Service Area 2 (SA2), etc.
A through H	Countywide Services located in a specified Service Area: A = Countywide program located in SA1 B = Countywide program located in SA2, etc.
CC1 through CC8	Critical Care services located in a specified Service Area: CC1 = Critical Care services located in SA1 CC2 = Critical Care services located in SA2, etc.
CS1 through CS8	Children's System of Care administrated program located in a specified Service Area: CS1 = CS Bureau Program located in SA1 CS2 = CS Bureau program located in SA2, etc.
FF1 through FF8	Fee-For-Service programs located in a specified Service Area: FF1 = Fee-For-Service program located in SA1 FF2 = Fee-For-Service program located in SA2, etc.
HQ	County Administration
LPS	State Hospitals
PG	Public Guardian

SERVICE LOCATION CODES

Identifies the location of services at which services were rendered.

<u>Codes</u>	<u>Description</u>	
03	School	
04	Homeless Shelter	(Effective 12-3-2007)
09	Prison/Correctional Facility	(Effective 2-23-2009)
	<i>(Not applicable to FFS 2 providers)</i>	
11	Office	
12	Home	
13	Assisted Living Facility	(Effective 12-3-2007)
14	Group Home	(Effective 12-3-2007)
16	Temporary Lodging, e.g. hotel	(Effective 2-23-2009)
20	Urgent Care	
21	Inpatient Hospital	
22	Outpatient Hospital	
23	Emergency Room – Hospital	
25	Birth Center	
26	Military Treatment Facility	
31	Skilled Nursing Facility – Without STP	
32	Nursing Facility – With STP	
33	Custodial Care Facility	
34	Hospice	
50	Federally Qualified Health Center	
51	Inpatient Psychiatric Facility	
52	Psychiatric Facility Partial Hospitalization	
53	Community Mental Health Center	
54	Intermediate Care Facility/Mentally Retarded	
55	Residential Substance Abuse Treatment Facility	
56	Psychiatric Residential Treatment Center	
71	State or Local Public Health Clinic	
99	Other Unlisted Facility	

SERVICE RECIPIENT

<u>Code</u>	<u>Service Recipient</u>
18	CalWorks
1	Community-at-Large
7	Community Care Facility
10	Community Organization
15	Community Support/Self-Help
4	Couple/Family
20	Disaster Survivor
19	General Relief Opportunity for Work Program (GROW)
16	Government Groups
21	Homeless
13	Human Services Agency Private
12	Human Services Agency Public
23	Human Services Agency Public/Private
3	Individual
14	Labor Union or Employee Organization
8	Law Enforcement/Justice System
17	Other Groups
9	Private Industry
22	Regional Center
11	Religious Organization
6	School Private
5	School Public
2	Special Population
24	Veteran

SOURCE OF INCOME

<u>Code</u>	<u>Description</u>
SA	Salary
UI	Unemployment Insurance
DI	Disability Insurance
SS	SSI
PA	Other Public Assistance
VA	Veterans' Administration
GR	Los Angeles County General Relief
IC	Inkind Care
SE	Self-Employed
OT	Other (includes retirement income)
NO	None
UN	Unknown

STATE CODES

<u>Code</u>	<u>Description</u>	<u>Code</u>	<u>Description</u>	<u>Code</u>	<u>Description</u>
AL	= Alabama	LA	= Louisiana	OK	= Oklahoma
AK	= Alaska	ME	= Maine	OR	= Oregon
AZ	= Arizona	MD	= Maryland	PA	= Pennsylvania
AR	= Arkansas	MA	= Massachusetts	RI	= Rhode Island
CA	= California	MI	= Michigan	SC	= South Carolina
CO	= Colorado	MN	= Minnesota	SD	= South Dakota
CT	= Connecticut	MS	= Mississippi	TN	= Tennessee
DE	= Delaware	MO	= Missouri	TX	= Texas
DC	= District of Columbia	MT	= Montana	UT	= Utah
FL	= Florida	NE	= Nebraska	VT	= Vermont
GA	= Georgia	NV	= Nevada	VA	= Virginia
HI	= Hawaii	NH	= New Hampshire	WA	= Washington
ID	= Idaho	NJ	= New Jersey	WV	= West Virginia
IL	= Illinois	NM	= New Mexico	WI	= Wisconsin
IN	= Indiana	NY	= New York	WY	= Wyoming
IA	= Iowa	NC	= North Carolina		
KS	= Kansas	ND	= North Dakota		
KY	= Kentucky	OH	= Ohio		

STREET ABBREVIATIONS

<u>Code</u>	<u>Description</u>	<u>Code</u>	<u>Description</u>	<u>Code</u>	<u>Description</u>
AL	Alley	FWY	Freeway	PL	Place
ARC	Arcade			PZ	Plaza
AVE	Avenue	GDNS	Gardens	PT	Point
		GRN	Green		
BLVD	Boulevard	GRV	Grove	RMP	Ramp
BRDG	Bridge			RCH	Ranch
BPS	Bypass	HTS	Heights	RD	Road
		HWY	Highway		
CL	Calle			SKWY	Skyway
CM	Camino	LN	Lane	SQ	Square
CK	Creek	LP	Loop	ST	Street
CSWY	Causeway				
CTR	Center	ML	Mall	TER	Terrace
CIR	Circle	MNR	Manor	THWY	Throughway
COM	Common	MEWS	Mews	TFWY	Trafficway
CT	Court	MTY	Motorway	TR	Trail
CV	Cove	MTN	Mountain	TUN	Tunnel
CRES	Crescent			TPKE	Turnpike
Xing	Crossing	OVL	Oval		
CYN	Canyon	OVPS	Overpass	VLY	Valley
				VIS	Vista
DR	Drive	PK	Park, Peak		
		PW	Parkway	UNP	Underpass
EST	Estates	PS	Pass		
EXWY	Expressway	PAS	Paseo	WLK	Walk
		PTH	Path	WL	Wall
		PKE	Pike		

SUPERVISORIAL DISTRICTS

These codes are used only on the Reporting Unit/Provider screen and are not entered by the field staff.

<u>Code</u>	<u>Description</u>
1 through 5	1 = Supervisorial District 1 2 = Supervisorial District 2, etc.
A through E	Countywide Service located in a specified Supervisorial District: A = Countywide program located in Supervisorial District 1 B = Countywide program located in Supervisorial District 2, etc.
S	State Hospitals
9	County Administration

TARGET GROUP

<u>Code</u>	<u>Description</u>
MD	Mentally Disordered
DD	Developmentally Disabled
MDO	Mentally Disordered Offender
DRG	Drug
ALC	Alcohol

TAXONOMY CODES

DMH Discipline Code	DMH Discipline Description	Taxonomy Code	Taxonomy Description
K1	Other Psychologist, paid employee (OTH PSY - PD)	101YM0800X	Counselor, Behavioral Health
K2	Other Psychologist, trainee - paid (OTH PSY - P T)	101YM0800X	Counselor, Behavioral Health
K3	Other Psychologist, unpaid volunteer (OTH PSY - VOL)	101YM0800X	Counselor, Behavioral Health
K4	Other Psychologist, trainee - unpaid (OTH PSY - U T)	101YM0800X	Counselor, Behavioral Health
N1	Other Social Worker, paid employee (OTH SW - PD)	101YM0800X	Counselor, Behavioral Health
N3	Other Social Worker, unpaid volunteer (OTH SW - VOL)	101YM0800X	Counselor, Behavioral Health
L3	Licensed Psychiatric Technician, unpaid volunteer (PSY TECH - U)	167G00000X	Licensed Psychiatric technician
L1	Licensed Psychiatric Technician, paid employee (PSY TECH - PD)	167G00000X	Licensed Psychiatric technician
D3	Vocational Nurse, unpaid volunteer - licensed (LVN - VOL)	164X00000X	Licensed Voc. Nurse
D1	Vocational Nurse, paid employee - licensed (LVN - PD)	164X00000X	Licensed Voc. Nurse
O3	Marriage, Family, Therapist unpaid volunteer - licensed (MFT LIC - U)	106H00000X	Marriage and Family Therapist
O1	Marriage, Family Therapist, paid employee- licensed (MFT LIC - PD)	106H00000X	Marriage and Family Therapist
A1	Nurse Practitioner, paid employee (NURS P - PD)	363LP0808X	Nurse Practitioner, Psychiatric/ Mental Health
I1	Pharmacist, paid employee - licensed (PHAR LIC - PD)	1835P1300X	Pharmacist, Psychopharmacy
H1	Other Physician, paid employee - licensed (MD LIC - PD)	208D00000X	Physician, General Practice
F4	Psychiatric Resident - unpaid (PSYC RES U)	208D00000X	Physician, General Practice
F2	Psychiatric Resident - paid (PSYC RES PD)	208D00000X	Physician, General Practice
H3	Other Physician, unpaid volunteer - licensed (MD LIC - VOL)	208D00000X	Physician, General Practice

TAXONOMY CODES (con't.)

DMH Discipline Code	DMH Discipline Description	Taxonomy Code	Taxonomy Description
G3	Psychiatrist, board certified or eligible - unpaid volunteer (PSY TRST - U)	2084P0800X	Physician, Psychiatry
G1	Psychiatrist, board certified or eligible - paid employee (PSY TRST - PD)	2084P0800X	Physician, Psychiatry
J1	Licensed Psychologist, paid employee (LIC PSY - PD)	103TC0700X	Psychologist, Clinical
C1	Nurse, paid employee - registered (NURS R PD)	163WP0808X	Registered Nurse, Psychiatric/ Mental Health
C3	Nurse, unpaid volunteer - registered (NURS R VOL)	163WP0808X	Registered Nurse, Psychiatric/ Mental Health
A4	Nurse Practitioner, student - unpaid (NURS P - UP ST)	163WP0808X	Registered Nurse, Psychiatric/ Mental Health
O2	Marriage, Family Therapist trainee - paid (MFT - P T)	225400000X	Rehabilitation Practitioner
Q2	Unlicensed Mental Health Worker, trainee - paid (MHW UNL - P T)	225400000X	Rehabilitation Practitioner
Q1	Unlicensed Mental Health Worker, paid employee (MHW UNL - PD)	225400000X	Rehabilitation Practitioner
P4	Rehabilitation Therapist, trainee - unpaid (RE THER - U T)	225400000X	Rehabilitation Practitioner
P3	Rehabilitation Therapist, unpaid volunteer (RE THER - VOL)	225400000X	Rehabilitation Practitioner
P2	Rehabilitation Therapist, trainee - paid (RE THER - P T)	225400000X	Rehabilitation Practitioner
P1	Rehabilitation Therapist, paid employee, (RE THER - PD)	225400000X	Rehabilitation Practitioner
O4	Marriage, Family Therapist trainee - unpaid (MFT - U T)	225400000X	Rehabilitation Practitioner
Q4	Unlicensed Mental Health Worker, trainee - unpaid (MHW UNL - U T)	225400000X	Rehabilitation Practitioner

TAXONOMY CODES (con't.)

DMH Discipline Code	DMH Discipline Description	Taxonomy Code	Taxonomy Description
Q3	Unlicensed Mental Health Worker, unpaid volunteer (MHW UNL - VOL)	225400000X	Rehabilitation Practitioner
M1	Licensed Clinical Social Worker - paid employee (LC SW - PD)	1041C0700X	Social Worker, Clinical
M3	Licensed Clinical Social Worker, unpaid volunteer (LC SW - VOL)	1041C0700X	Social Worker, Clinical
H2	Other Physician, paid intern (MD INTRV - PD)	174400000X	Specialist
H4	Other Physician, unpaid intern (MD INTRN - U)	174400000X	Specialist
N4	Other Social Worker, trainee - unpaid (OTH SW - U T)	374700000X	Technician
L2	Licensed Psychiatric Technician, trainee - paid (PSY Tech - P T)	374700000X	Technician
C2	Nurse, student - paid (NURS PD ST)	374700000X	Technician
C4	Nurse, student - unpaid (NURS UP ST)	374700000X	Technician
D4	Vocational Nurse, student - unpaid (V NURS - UP ST)	374700000X	Technician
L4	Licensed Psychiatric Technician, trainee - unpaid (PSY Tech - U T)	374700000X	Technician
D2	Vocational Nurse, student - paid (V NURS - PD ST)	374700000X	Technician

VETERAN STATUS

<u>Code</u>	<u>Description</u>
Y	Yes, client is a military veteran
N	No
U	Unknown